KoreaMed Synapse의 유용성

한양대 구리병원 영상의학과
의편협 출판윤리위원장

함 창 곡

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The Western Pacific Region Index Medicus (WPRIM) is a project of the WHO Western Pacific Regional Office in collaboration with several institutions in its Member States. This is the Region's contribution to the Global Health Library (GHL) initiative which aims to extend to all the benefits of the knowledge that is essential to the fullest attainment of health. WPRIM will be deployed and hosted, along with the index medici of other WHO Regions, at the Global Index Medicus portal under the GHL platform, where searches can be conducted individually or simultaneously through a federated search engine.

Goal

The creation of an online index of medical and health journals published in Member States of the WHO Western Pacific Region which can be accessed on the Internet thus ensuring global accessibility of medical and health research done in the Region.

Objectives

- To index selected medical/health journals in Member States of the WHO Western Pacific Region.
- To create a bibliographic database containing records linked to their full text.
- To raise the level of journal publishing in Member States of the WHO Western Pacific Region through a peer-review system.
- To build the capacity of participating health institutions

- WPRIM Newsletter Volume 1 Number 1 (August 2007)
- WPRIM Newsletter Volume 2 Number 1 (May 2008)

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ASIA PACIFIC ASSOCIATION OF MEDICAL JOURNAL EDITORS (APAME) on 4-5 May 2008.

APAME is the Asia Pacific Association of Medical Journal Editors (APAME), established in Seoul Korea on May 5, 2008. Members include individual editors, editors' societies and those working on scientific communication from 11 countries including Australia, China, Fiji, Japan, Korea, Malaysia, Mongolia, Papua New Guinea, Philippines, Singapore and Vietnam. Officers from World Health Organization participate as an advisor or a coordinator.

Professors Chang-Kok Hahm (Korea) and John T Arokiasamy (Malysia) are the Presidnet and the Vice-president. Professor Jeong-Wook Seo (jwseo@snu.ac.kr) is the Secretary General. Prof Chang-Kok Hahm is the chairperson of the Planning and Finance Committee, Prof Wifred CG Peh is the chairperson of the Education and IT Committee and Dr Joselito Mario Co Avila is the chairperson of the Editorial Policy and Ethics Committee.

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오픈액세스(Open Access)는 학문과 사회의 발전을 위하여 누구나 어디서든지 각종 연구의 결과물과 학술지들을 출판과 동시에 인터넷으로 자유롭게 공유할 수 있도록 하는 국제적인 운동으로 한국오픈액세스포럼에서는 추계 세미나를 개최하여 국내외의 오픈액세스 활동을 조명하고, CCL(Creative Commons License)과 같은 오픈액세스 저작권에 대한 이해와 국내외 오픈액세스 출판사업의 방향을 공유하고 정책적 대안을 모색하고자 합니다. 또한 해외 학술지 저널의 오픈액세스출판 사업에 대한 소개와 국내에서의 최근 동향등에 대한 발표가 있을 예정입니다.

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◎ 14:20~14:25 【축사】
◎ 14:25~14:45 【회장인사】
◎ 14:45~15:25 【발표 1】 디지털 시대의 저작권과 CCL(윤종수 : 대전지법 논산지원 지원장)
◎ 15:25~15:40 Coffee Break
◎ 15:40~16:20 【발표 2】 국내외 오픈액세스 활동의 조명(심원식 : 성균관대 교수)
◎ 16:20~17:00 【발표 3】 PKP의 오픈액세스 저널 사업의 소개(이수상 : 부산대 교수)

※ 참가등록

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Charles B. Keetley

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Francis J. Shepherd

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ANNALS OF SURGERY.

ON REMOVAL (BY SCRAPING OUT) OF THE MARROW OF LONG BONES, AND ESPECIALLY ON THIS PROCEEDING AS A TREATMENT OF OSTEO-MYELITIS. ALSO ON THE SAME FOLLOWED BY THE LOCAL APPLICATION OF CORROSIVE SUBLIMATE SOLUTION AND OF IODOFORM.

By CHARLES B. KEETLEY, F. R. C. S.,

OF LONDON.

SENIOR SURGEON TO THE WEST LONDON HOSPITAL; SURGEON TO THE SURGICAL AID SOCIETY.

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Extent of Surgery Affects Survival for Papillary Thyroid Cancer

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Abstract

Background:

The extent of surgery for papillary thyroid cancers (PTC) remains controversial. Consensus guidelines have recommended total thyroidectomy for PTC ≥1 cm; however, no study has supported this recommendation based on a survival advantage. The objective of this study was to examine whether the extent of surgery affects outcomes for PTC and to determine whether a size threshold could be identified above which total thyroidectomy is associated with improved outcomes.

Methods:

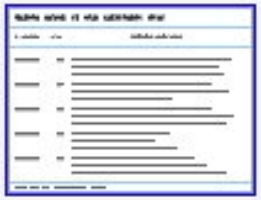

TABLE 1. Characteristics of Patients Who Underwent Surgery for PTC

For all patients with PTC, the recurrence rates were 5.7% at 5 years and 9.4% at 10 years. Recurrence rates were compared by tumor size and extent of surgery (Fig. 1). Ten-year recurrence rates increased with increasing tumor size: <1.0 cm 4.6%, 1.0 to 1.9 cm 7.1%, 2.0 to 2.9 cm 8.6%, 3.0 to 3.9 cm 11.6%, 4.0 to 8.0 cm 17.2%, and >8.0 cm 24.8% ($P < 0.0001$ for each pairwise comparison). When examining all tumor sizes together using univariate methods, patients who underwent total thyroidectomy had an unadjusted 10-year recurrence rate of 7.7%; whereas, patients who underwent lobectomy had an unadjusted 10-year recurrence rate of 9.8% ($P < 0.05$).

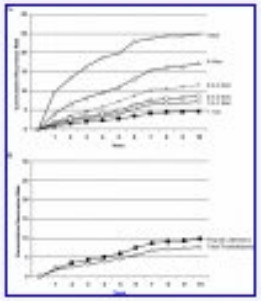

FIGURE 1. Recurrence rates after surgery for patients with PTC (A) by tumor size and (B) by extent of surgery.

Survival rates were compared by tumor size and extent of surgery (Fig. 2). Ten-year survival rates declined with increasing tumor size, but survival was statistically worse only for tumors larger than 4.0 cm ($P < 0.0001$): <1.0 cm 98.0%, 1.0 to 1.9 cm 98.4%, 2.0 to 2.9 cm 98.5%, 3.0 to 3.9 cm 95.5%, 4.0 to 8.0 cm 90.5%, and >8.0 cm 81.3%. When examining all tumor sizes together using univariate methods, 10-year survival was higher for patients who underwent total thyroidectomy compared with lobectomy: 98.4% versus 97.1% ($P < 0.05$).

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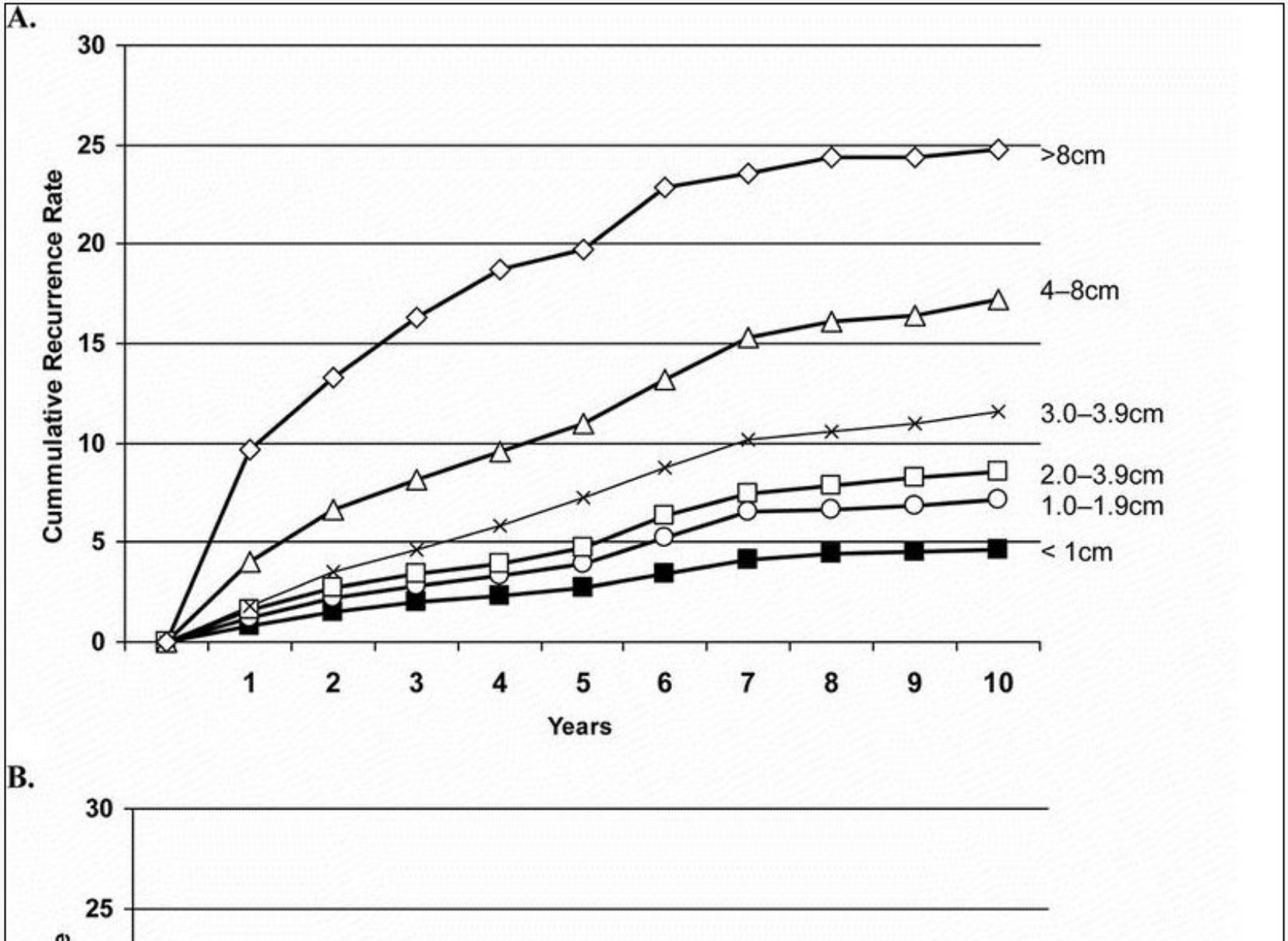

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$5 million - $10 million	$1,650
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$25 million - $50 million	$8,300
$50 million - $100 million	$14,000
$100 million - $200 million	$22,000
$200 million - $500 million	$33,000
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- Journal of Gynecologic Oncology J Gynecol Oncol | 2005-0380
- Journal of Korean Endocrine Society J Korean Endocr Soc | 1015-6380
- Journal of Korean Medical Science J Korean Med Sci | 1011-8934
- Journal of Korean Neurosurgical Society J Korean Neurosurg Soc | 1225-8245

Began publication in 2000.

1229-6929 Print

2008


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Began publication in 1986.

1011-8934 Print
1598-6357 On-line

2008


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2007


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2006


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Began publication in 1960.

0513-5796 Print
1976-2437 On-line

2008

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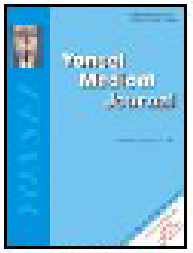

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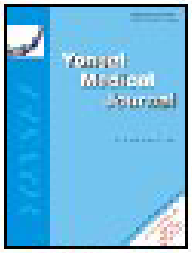

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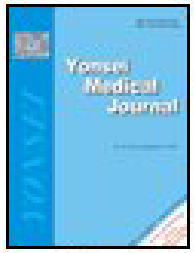

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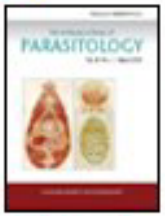
0023-4001 Print
1738-0006 On-li

2008



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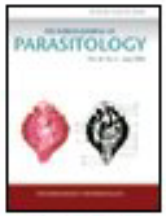

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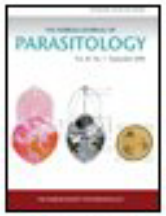

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2007


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2006


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2005

Began publication in 1988. Title changed from Journal of Korean Pain Society in 2005

1226-2579 Print

2008

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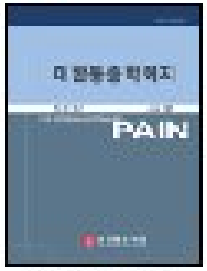
2007



v20 n1

v20 n2

Effect of Superior Cervical Sympathetic Ganglion Block on Brain Injury Induced by Focal Cerebral Ischemia/Reperfusion in a Rat Model.

Korean J Pain. 2007 Dec;20(2):83-91. doi: 10.3344/kjp.2007.20.2.83.

Lee AR, Yoon MO, Kim HH, Choi JM, Jeon HY, Shin JW, Leem JG.

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Antihyperalgesic Effects of Ethosuximide and Mibefradil, T-type Voltage Activated Calcium Channel Blockers, in a Rat Model of Postoperative Pain.

Korean J Pain. 2007 Dec;20(2):92-99. doi: 10.3344/kjp.2007.20.2.92.

Shinn HK, Cha YD, Han JU, Yoon JW, Kim BS, Song JH.

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Korean J Pain. 2007 Dec;20(2):100-105. doi: 10.3344/kjp.2007.20.2.100.

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DOI: 10.3344/kjp.2007.20.2.83

Effect of Superior Cervical Sympathetic Ganglion Block on Brain Injury Induced by Focal Cerebral Ischemia/Reperfusion in a Rat Model

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Conclusions

Brain injury induced by focal cerebral ischemia/reperfusion was reduced by an SCG block using local anesthetics. This finding suggests that a cervical sympathetic block could be considered as another treatment option for the treatment of cerebral vascular diseases.

Keywords: cerebral ischemia/reperfusion injury, local anesthetics, sympathetic ganglion block.

Figures

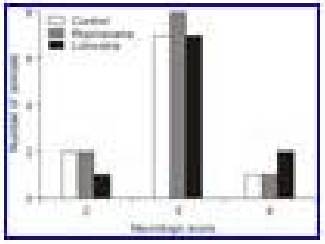
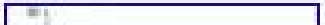


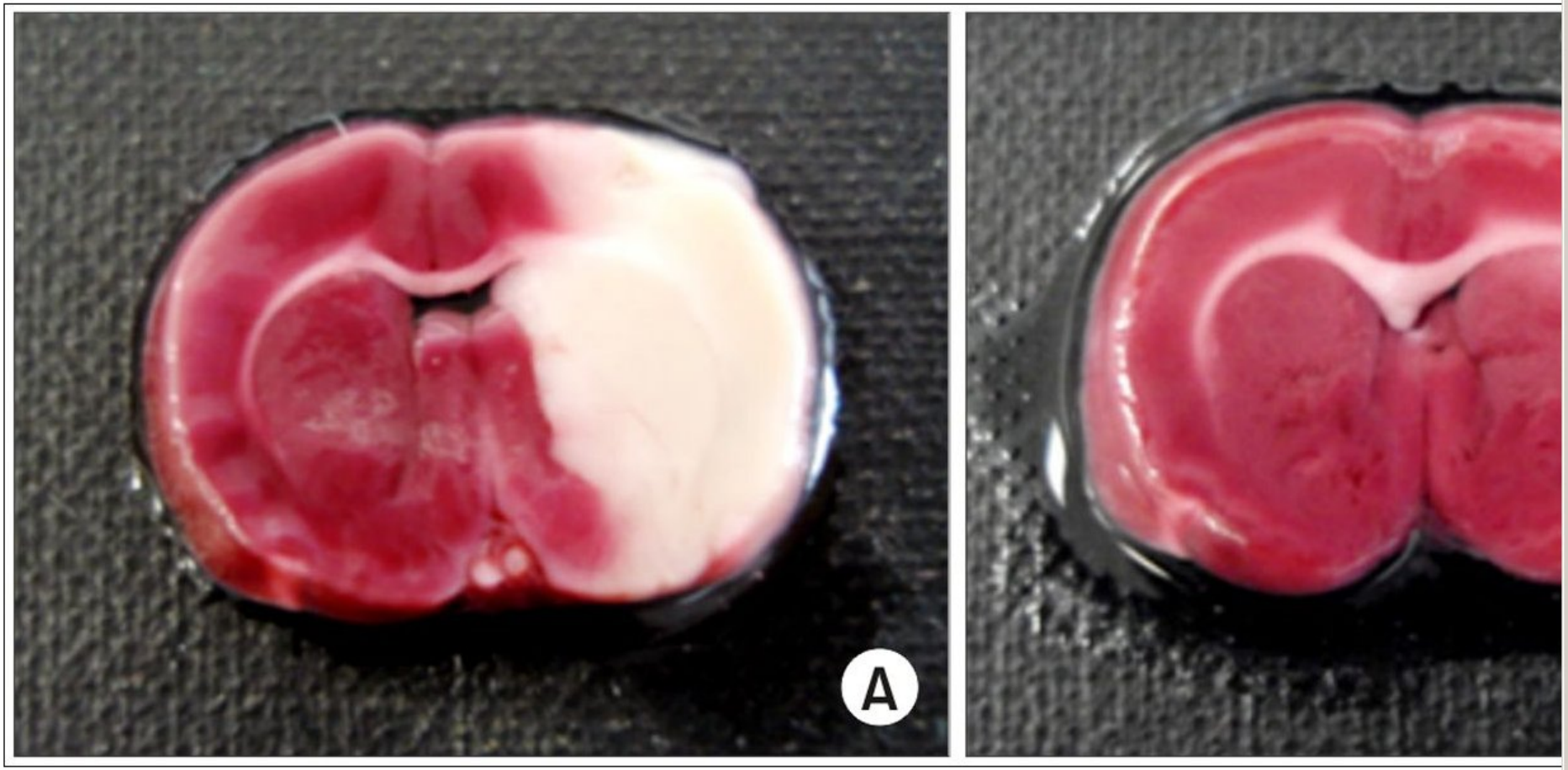
Fig. 1

There were no significant differences in the neurologic scores measured at 24 hours after cerebral ischemia/reperfusion injury among the three groups.

Fig. 2

Representative 2,3,5-triphenyltetrazolium chloride (TTC) stained brain sections from the control (A), ropivacaine (B) and lidocaine group (C) are shown. The white areas represent the infarct regions in these sections.





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