

초록작성요령과 투고시 주의사항



건국대학교병원 소화기내과
이 선 영



강의 순서



초록작성요령

1. 표지
2. 제목
3. 초록

투고시 주의사항

1. 편지
2. 심사위원 선정

1. 표지



1. 제목
2. 저자
3. 소속
4. 글자수 (word counts)
5. 간추린 제목 (running title)
6. 교신저자 및 연락처 (corresponding author)
7. 사사, 연구비 등 (acknowledgement)

저널마다 다르므로 투고규정
참조

- 1 Different prevalence in lymphovascular invasion among early gastric cancers between Korea and Japan
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- 3
- 4 Word counts: 2,520 words
- 5 Running title: Lymphovascular invasion in EGC
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- 7 Acknowledgement: This work was supported by the Korean National Research Foundation (NRF 2016-K2A9A2A-07003625 to Dr. Sun-Young Lee) and the Japan Society for the Promotion of Science (JSPS 16042211-000061 to Dr. Yuji Naito). We thank to Dr. Kiyoshi Ogiso, Dr. Takaaki Murakami, Dr Yutaka Inada, Dr. Naoto Iwai, and Dr. Tomohiro Ueda at the Department of Molecular Gastroenterology and Hepatology, Kyoto Prefectural University of Medicine for their assistance.

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Gut Liver. 2017 Jan 20. doi: 10.5009/gnl16281. [Epub ahead of print]

Differences in Prevalence of Lymphovascular Invasion among Early Gastric Cancers between Korea and Japan.

Lee SY¹, Yoshida N², Dohi O², Lee SP¹, Ichikawa D³, Kim JH¹, Sung IK¹, Park HS¹, Otsuji E³, Itoh Y², Shim CS¹, Han HS⁴, Kishimoto M⁵, Naito Y².

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Abstract

BACKGROUND/AIMS: The presence of invasion is a diagnostic criterion of early gastric cancer (EGC) in Korea, whereas diagnosis in Japan is based on enlarged nuclei and prominent nucleoli. Moreover, the depth of invasion is the location of cancer cell infiltration in Korea, whereas it is the location of lymphovascular invasion (LVI) or cancer cell infiltration in Japan. We evaluated the characteristics of EGC with LVI to uncover the effects of different diagnostic criteria.

METHODS: Consecutive T1-stage EGC patients who underwent complete resection were included after endoscopic or surgical resection. The presence of LVI was evaluated.

RESULTS: LVI was present in 112 of 1,089 T1-stage EGC patients. LVI was associated with depth of invasion ($p < 0.001$) and age ($p = 0.017$). The prevalence of LVI in mucosal cancer was significantly higher in Korea ($p < 0.001$), whereas that of submucosal cancer was higher in Japan ($p = 0.024$). For mucosal EGC types, LVI was positively correlated with diagnostic criteria applied in Korea ($p = 0.017$). For submucosal EGC types, LVI was positively correlated with Japanese criteria ($p = 0.001$) and old age ($p = 0.045$).

CONCLUSIONS: The higher prevalence of LVI for mucosal EGC in Korea and for submucosal EGC in Japan indicates that different diagnostic criteria should be considered when reading publications from other countries.

KEYWORDS: Depth; Early gastric cancer; Invasion; Stomach neoplasms



2. 제목



- Why, who, what, where, when, how에 대한 답변 중에서 연구 주제나 가설이나 결론과 연관된 단어 선별
 1. **주제:** 연구유형이나 환자군 언급
 2. **가설:** 질문형이거나 연구목적을 응용
 3. **결론:** 문장형 (현재형이어야 함. 과거형은 금지. 문장형 자체를 금지하는 저널도 있음)

거부감을 유발하는 제목:

- Analysis of~, investigation of~
- A study of~, A case of~
- Novel~, New~

2-1. 제목- 연구유형



Study design

Neurogastroenterol Motil. 2016 Sep;28(9):1401-8. doi: 10.1111/nmo.12841. Epub 2016 Apr 19.

A prospective study on symptom generation according to spicy food intake and TRPV1 genotypes in functional dyspepsia patients.

Key word

Lee SY¹, Masaoka T², Han HS³, Matsuzaki J², Hong MJ¹, Fukuhara S², Choi HS¹, Suzuki H^{2,4}.

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⁴Medical Education Center, Keio University School of Medicine, Tokyo, Japan.

Abstract

BACKGROUND: Capsaicin is an ingredient of red peppers that binds to transient receptor potential vanilloid subtype 1 (TRPV1), and Koreans eat more capsaicin-rich food than do Japanese. This study aimed to compare symptom generation according to TRPV1 genotypes and the intake of spicy foods.

METHODS: Consecutive functional dyspepsia (FD) patients who were evaluated at Konkuk University Medical Centre (Korea) and Keio University Hospital (Japan) were included. Questionnaires on spicy food intake, patient assessment of gastrointestinal symptoms (PAGI-SYM), patient assessment of quality of life, and hospital anxiety and depression scale were provided. Blood was sampled for the detection of TRPV1 polymorphisms, and upper gastrointestinal endoscopy was performed with biopsies.

KEY RESULTS: Of 121 included subjects, 35 and 28 carried the TRPV1 CC and GG genotypes, respectively, with the prevalence rates not differing between Japan and Korea. The prevalence of FD subtypes did not differ with the spicy food intake, TRPV1 genotypes, or *Helicobacter pylori* infection. Neither TRPV1 polymorphisms nor *H. pylori* infections were related to scores on the PAGI-SYM questionnaires, but spicy food intake was positively correlated with the scores for stomach fullness ($p = 0.001$) and retching ($p = 0.001$). Using the linear regression analysis, stomach fullness was associated with spicy food intake ($p = 0.007$), whereas retching was related to younger age ($p < 0.001$) and female gender ($p = 0.014$).

CONCLUSIONS & INFERENCES: Upper gastrointestinal symptoms are more common in subjects with a higher consumption of spicy foods, younger age and female gender, regardless of TRPV1 genotypes and the *H. pylori* infection status. Capsaicin-rich foods may induce stomach fullness.



2-2. 제목 - 질문형



Does the antibody production ability affect the serum anti-Helicobacter pylori IgG titer?

Question

Chung HA¹, Lee SY¹, Moon HW¹, Kim JH¹, Sung IK¹, Park HS¹, Shim CS¹, Han HS¹.

Author information

¹Hyun Ah Chung, Sun-Young Lee, Jeong Hwan Kim, In-Kyung Sung, Hyung Seok Park, Chan Sup Shim, Department of Internal Medicine, Konkuk University School of Medicine, Seoul 05030, South Korea.

Abstract

AIM: To investigate the relationship between serum titers of anti-Helicobacter pylori (H. pylori) immunoglobulin G (IgG) and hepatitis B virus surface antibody (HBsAb).

METHODS: Korean adults were included whose samples had positive Giemsa staining on endoscopic biopsy and were studied in the hepatitis B virus surface antigen (HBsAg)/HBsAb serologic assay, pepsinogen (PG) assay, and H. pylori serologic test on the same day. Subjects were excluded if they were positive for HBsAg, had a recent history of medication, or had other medical condition(s). We analyzed the effects of the following factors on serum titers of HBsAb and the anti-H. pylori IgG: Age, density of H. pylori infiltration in biopsy samples, serum concentrations of PG I and PG II, PG I/II ratio, and white blood cell count.

RESULTS: Of 111 included subjects, 74 (66.7%) exhibited a positive HBsAb finding. The serum anti-H. pylori IgG titer did not correlate with the serum HBsAb titer ($P = 0.185$); however, it correlated with the degree of H. pylori infiltration on gastric biopsy ($P < 0.001$) and serum PG II concentration ($P = 0.042$). According to the density of H. pylori infiltration on gastric biopsy, subjects could be subdivided into those with a marked (median: 3.95, range 0.82-4.00) ($P = 0.458$), moderate (median: 3.37, range 1.86-4.00), and mild H. pylori infiltrations (median: 2.39, range 0.36-4.00) ($P < 0.001$). Subjects with a marked H. pylori infiltration on gastric biopsy had the highest serological titer, whereas in subjects with moderate and mild H. pylori infiltrations titers were correspondingly lower ($P < 0.001$). After the successful eradication, significant decreases of the degree of H. pylori infiltration ($P < 0.001$), serum anti-H. pylori IgG titer ($P < 0.001$), and serum concentrations of PG I ($P = 0.028$) and PG II ($P = 0.028$) were observed.

CONCLUSION: The anti-H. pylori IgG assay can be used to estimate the burden of bacteria in immunocompetent hosts with H. pylori infection, regardless of the HBsAb titer after HBV vaccination.

KEYWORDS: Antibody; Helicobacter pylori; Hepatitis B; Immunoglobulin G; Pepsinogen



2-3. 제목 - 문장형



Gastroenterology. 2010 Nov;139(5):1519-25. doi: 10.1053/j.gastro.2010.08.001. Epub 2010 Aug 11.

Microsatellite alterations at selected tetranucleotide repeats are associated with morphologies of colorectal neoplasias.

Lee SY¹, Chung H, Devaraj B, Iwaizumi M, Han HS, Hwang DY, Seong MK, Jung BH, Carethers JM.

Answer

Author information

¹Department of Internal Medicine, Konkuk University School of Medicine, Seoul, Korea.

Abstract

BACKGROUND & AIMS: Elevated microsatellite alterations at selected tetranucleotide repeats (EMAST) occurs during microsatellite instability (MSI) that is not associated with major defects in DNA mismatch repair (MMR) but rather the reduced (heterogenous) expression of the MMR protein hMSH3; it occurs in sporadic colorectal tumors. We examined the timing of development of EMAST during progression of colorectal neoplasias and looked for correlations between EMAST and clinical and pathology features of tumors.

METHODS: We evaluated tumor samples from a cohort of patients that had 24 adenomas and 84 colorectal cancers. EMAST were analyzed after DNA microdissection of matched normal and tumor samples using the polymorphic tetranucleotide microsatellite markers MYCL1, D9S242, D20S85, D8S321, and D20S82; data were compared with clinical and pathology findings. Traditional MSI analysis was performed and hMSH3 expression was measured.

RESULTS: Moderately differentiated adenocarcinomas and poorly differentiated adenocarcinomas had higher frequencies of EMAST (56.9% and 40.0%, respectively) than well-differentiated adenocarcinomas (12.5%) or adenomas (33.3%) ($P = .040$). In endoscopic analysis, ulcerated tumors had a higher frequency of EMAST (52.3%) than flat (44.0%) or protruded tumors (20.0%) ($P = .049$). In quantification, all tumors with >3 tetranucleotide defects lost MSH3 (>75% of cells); nuclear heterogeneity of hMSH3 occurred more frequently in EMAST-positive (40.0%) than in EMAST-negative tumors (13.2%) ($P = .010$).

CONCLUSIONS: EMAST is acquired during progression of adenoma and well-differentiated carcinomas to moderately and poorly differentiated carcinomas; it correlates with nuclear heterogeneity for hMSH3. Loss of hMSH3 corresponds with multiple tetranucleotide frameshifts. The association between EMAST and ulcerated tumors might result from increased inflammation.

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PMID: 20708618 PMCID: [PMC2967646](#) DOI: [10.1053/j.gastro.2010.08.001](#)



인용횟수가 높은 최근 원저



1. Diet Low in FODMAPs Reduces Symptoms of Irritable Bowel Syndrome as Well as Traditional Dietary Advice: **A Randomized Controlled Trial**
2. **Risks** Associated With Anesthesia Services During Colonoscopy
3. Ramosetron **Reduces** Symptoms of Irritable Bowel Syndrome With Diarrhea and Improves Quality of Life in Women

3. 초록



- **Background (현재형) / Aims (과거형)** – what is already known and why you did it
- **Methods** – how you did it
- **Results** – what you found
- **Conclusions** – what it means (일부 저널은 과거형 인정)

3-1. 초록 - 배경/목적



- 2-3 문장
- Background: 알려진 이론적 근거
- Aim(s): 어떤 궁금증을 해결하려고 하는지 언급, 기존의 정설로 밝혀지지 않은 구체적인 내용, 가설 등

복사해서 옮기면 안 되는 것:

- 해당 원저의 본문 문장
- 기존 논문의 문장
- 제목을 그대로 반복
- 사전에 나온 용어 설명

표절 방지 프로그램



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27%
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Mixed articles
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Original article

Does the Antibody Production Ability Affect the Serum Anti-*Helicobacter pylori* Immunoglobulin G titer?

Hyun Ah Chung,² Sun-Young Lee,^{*} Hee Won Moon,[†] Jeong Hwan Kim,^{*} In-Kyung Sung,^{*} Hyung Seok Park^{*} and Chan Sup Shim^{*}

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Korea

Word counts: 1,633 words

Running title: Serum anti-*H. pylori* IgG titer

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Tel: 82-2-2030-7747

Match Overview		
Match 1 of 1		
1	Internet 97 words crawled on 07-Nov-2010 www.wjnet.com	3%
2	CrossCheck 95 words Lee, S.-Y., H.-W. Moon, M. Hur, and Y.-M. Yun. "Validation... of Western <i>Helicobacter pylori</i> IgG antibody assays in Ko	3%
3	CrossCheck 86 words Choi, Hong Seok, Sun-Young Lee, Jeong Hwan Kim, In-Kyung Sung, Hyung Seok Park, Chan Sup Shim, and Ch	2%
4	CrossCheck 77 words Lee, Sang Pyo, Sun-Young Lee, Jeong Hwan Kim, In-Kyung Sung, Hyung Seok Park, Chan Sup Shim, and Hee-	2%
5	CrossCheck 44 words Vonkeman, Harald E, HTJL deLeest, MAFJ van deLaar, J vanBaarlen, KSS Steen, WF Lems, JWJ Bijlsma, EJ Kuip	1%
6	Internet 43 words crawled on 09-Oct-2013 www.biomedcentral.com	1%
7	CrossCheck 43 words Hong, Mi Jin, Sun-Young Lee, Jeong Hwan Kim, In-Kyung Sung, Hyung Seok Park, Chan Sup Shim, and Choon J	1%
8	CrossCheck 40 words Muhsen, K., M. F. Pasetti, M. K. Reymann, D. Y. Graham, and M. M. Levine. "Helicobacter pylori infection Affects Im	1%
9	Internet 39 words crawled on 01-Apr-2012 hub.hku.hk	1%
10	CrossCheck 38 words Stein, Marcelo B., Rosângela Satermo-Goncalves, and Monica A. McArthur. "Complex Adaptive Immunity to Eri...	1%
11	CrossCheck 37 words A. M. Hirschl. "Die Diagnose der Helicobacter pylori-Infektion", <i>Acta Medica Austriaca</i> , 9/2000	1%



3-2. 초록 - 방법



- 3-4 문장
- 주요 기법을 설명
- 새로운 기술이 있으면 강조

금지:

- 윤리위원회 승인서, 환자 동의서 등 IRB 관련 내용: 본문 방법 첫 문단에서 기술
- 샘플 수 산정 등 통계 관련 내용: 본문 방법 마지막 문단에서 기술
- 잘 알려진 실험기법에 대한 자세한 내용

3-3. 초록 - 결과



- 3-4 문장
- 주요 결과를 구체적인 숫자와 p -value로 나열
- 초록의 방법에서 설명한 결과 순으로 적으면 유리
- 결론으로 이어질 타당성 있는 결과를 위주로 적기
- 본문의 주요내용과 일치
- 모든 결과를 적으려고 하지 않는다.

금지:

- 애매한 용어 - very, little, etc
- 표, 그림

3-4. 초록 - 결론



- 1-3 문장
- 가장 많이 읽히는 부분이므로, 간결하게 설명
- 초록 서론의 목적에 대한 답이 되는지 확인
- 연구가설에 대한 해석
- 근거가 결과에 통계수치와 함께 기재되어 있는지 확인
- 해당 원저의 고찰의 마지막 문단의 내용을 요약
- 제한점이 있다면 'might', 'seem', 'could' 등을 사용가능

금지:

- 결과와 무관한 내용, 다른 사람의 연구 결과, 토의사항, 참고문헌, 해당연구의 한계점 등

고찰의 마지막 문단



In summary, EMAST is less frequent in colorectal adenomas, well-differentiated adenocarcinomas, and CRCs without ulcerations. EMAST is associated with nuclear heterogeneity of hMSH3 expression. These observations suggest that the EMAST phenotype is linked to adenoma-to-carcinoma morphology as well as the endoscopic appearance of ulceration and nuclear hMSH3 expression.

초록의 예시



Helicobacter. 2015 Feb;20(1):49-55. doi: 10.1111/hel.12173. Epub 2014 Sep 25.

Correlation between Helicobacter pylori infection, IgE hypersensitivity, and allergic disease in Korean adults.

Lee SP¹, Lee SY, Kim JH, Sung IK, Park HS, Shim CS, Moon HW.

⊕ Author information

Abstract

배경/목적

BACKGROUND: The correlation between allergic disease and Helicobacter pylori infection is still controversial in endemic areas. The aim of this study was to determine whether H. pylori infection is related to allergic disease and/or immunoglobulin E (IgE) hypersensitivity in Korean adults.

방법

MATERIALS AND METHODS: Consecutive Korean adults who visited our center for a routine checkup were enrolled. All subjects completed a questionnaire that was designed to ascertain their medical history pertaining to physician-diagnosed allergic disease, allergy treatments, and H. pylori eradication therapy. Blood was sampled for serum anti-H. pylori IgG antibody. IgE hypersensitivity was measured using a commercially available ImmunoCAP(®) Phadiatop (Phadia AB, Uppsala, Sweden).

결과

RESULTS: Of the 3376 Korean adults who were enrolled, 62 did not answer to the questionnaires adequately and were thus excluded. The proportion of noninfected subjects ($p < .001$) and the prevalence of IgE-related allergic disease ($p < .001$) were both highest among those aged <40 years, while the prevalence of non-IgE-related allergic disease was highest among those aged ≥ 70 years ($p < .001$). Logistic regression analysis revealed that being younger than 40 years was significantly related to the absence of H. pylori infection (OR = 2.507, 95% CI = 1.621-3.878, $p < .001$).

결론

CONCLUSIONS: The statuses of H. pylori infection, IgE hypersensitivity, and allergic diseases differ with age group, there being a higher prevalence of IgE-related allergic disease and a lower H. pylori infection rate among young adults. The hygiene hypothesis might explain these findings in young Koreans, due to the rapid development and improvements in sanitation in Korea.

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KEYWORDS: Helicobacter pylori; IgE hypersensitivity; Phadiatop; allergy; eradication

PMID: 25257099 [PubMed - indexed for MEDLINE]

논문 탈락의 5대 원인



1. 독창성 결여: 이미 답이 알려진 연구목적
2. 수정하기 어려운 방법론상의 문제점들: 샘플 수 부족, 대조군 결여, 연구디자인 오류
3. 과학적 근거 결여: 통계 오류, 결과에 기반하지 않은 결론
4. 임상적으로 유용하지 않은 결론
5. 저널과 무관한 주제: 일부 저널은 참고문헌에 해당 저널의 최근 논문이 인용되었는지 검토

투고편지 (cover letter) 예시 1



Dear Dr. 편집장 이름,

Enclosed is our manuscript “제목” which we are submitting for your consideration for publication in 저널명.

Our findings confirm that 결과1. We also found that 결과2. We believe these findings have significance in the future for 결론.

This manuscript has not yet been published and is not under consideration elsewhere. Thank you for your time and consideration.

Warmest regards, 저널에서 원하는 서약 내용을 편지에 기술

서명

교신저자 이름

소속

주소(연락처, 이메일)

편지 예시 2



Dear Dr. 편집장 이름,

My co-authors and I are pleased to submit an original research article entitled, “제목” to 저널명. We found that 결과.

This study was supported by 기관명, and 저자명 is supported by 업체명. The views expressed in this article are those of the authors and do not necessarily reflect the position or policy.

This article is not under consideration for publication elsewhere. There are no conflicts of interest to disclose. Thank you in advance for your consideration.

With warmest regards,

편지 예시 3



Dear Dr. 편집장 이름,

I am pleased to submit our manuscript entitled, “제목” by 저자명 submitted as an original article to 저널명. This study exhibits presumably novel findings: 결과.

All authors agree with submission of this paper to this journal. This paper has not been previously published. This paper is being submitted first to 저널명, and has not been submitted to any other scientific journal. The authors list their conflicts of interest in the title page. This paper was approved by the IRB of 기관명, and was funded by 기관명.

Thank you for considering this paper for this prestigious journal. We will gladly perform revisions necessary for publication in 저널명.

Sincerely,

심사위원 선정시 주의사항



- 참고문헌의 교신저자를 적으면 유리
- 해당 분야의 전문가 중 해당 저널에 최근에 논문을 게재한 저자를 적으면 유리 (이메일이 등록되어 있을 가능성)

Historical Reviewer Invitation Statistics

Total Invitations	Agreed to Review	Declined to Review	Un-invited Before Agreeing to Review	Terminated Before Agreeing to Review
17	9	4	4	0

Historical Reviewer Performance Summary

Total Completed Reviews	Submitted on Time	Submitted Late	Un-invited After Agreeing to Review	Terminated After Agreeing to Review	Date Last Review Completed
9	9	0	0	0	May 27, 2011

Historical Reviewer Averages

Days to Respond to Invitation	Days to Complete Review	Days Late	# of Reminders	Manuscript Rating	Reviewer Rating
1	2	-11	0	45.14	95



우수 심사자와 불량 심사자



- **좋은 심사자**란 긍정적인 마음가짐으로 논문을 읽고, 저자들조차 모르는 논문의 숨겨진 장점들을 찾아내서, 제대로 논문에 표현할 수 있도록 통계방법, 연구디자인, 표/그림 작성법을 구체적인 글로 조언하는 전문가
- **불량 심사자 색출기준: red flag로 표시**
 1. 심사를 주변에 알리거나 저자에게 연락한 자
 2. 심사 후에 논문을 보관한 자
 3. 다른 사람이 쓴 심사평을 본인 것으로 속인 자
 4. 저자와 이해관계(conflict of interest)가 있는 자
 5. 비공식 이메일을 여러개 등록하여 악용하는 자

요약



1. 제목은 주요 단어와 연구유형으로 궁금증을 유발
2. 초록은 정해진 단어 수 내에서 원저 내용을 요약
3. 배경에서는 아직 알려지지 않은 내용을 목적으로 기재
4. 방법에서는 결과로 이어지는 주요기법을 기재
5. 결과에서는 숫자와 p -value로 과학적 증거를 제시
6. 결론은 초록의 결과에 기반해서 작성하되, 가장 중요한 내용(임상적으로 유용한 독창적인 결론)을 강조
7. 편지에는 편집장, 저널명, 주요결과, 저널에서 원하는 서약내용을 기재
8. 심사위원은 논문의 주제 및 투고하는 저널과 연관된 전문가 중에서 선정

Diet low in FODMAPs reduces symptoms of irritable bowel syndrome as well as traditional dietary advice: a randomized controlled trial.

Böhn L¹, Störsrud S¹, Liljebo T², Collin L³, Lindfors P⁴, Törnblom H¹, Simrén M⁵.

+ Author information

Abstract

BACKGROUND & AIMS: A diet with reduced content of fermentable short-chain carbohydrates (fermentable oligo-, di-, monosaccharides, and polyols [FODMAPs]) has been reported to be effective in the treatment of patients with irritable bowel syndrome (IBS). However, there is no evidence of its superiority to traditional dietary advice for these patients. We compared the effects of a diet low in FODMAPs with traditional dietary advice in a randomized controlled trial of patients with IBS.

METHODS: We performed a multi-center, parallel, single-blind study of 75 patients who met Rome III criteria for IBS and were enrolled at gastroenterology outpatient clinics in Sweden. Subjects were randomly assigned to groups that ate specific diets for 4 weeks—a diet low in FODMAPs (n = 38) or a diet frequently recommended for patients with IBS (ie, a regular meal pattern; avoidance of large meals; and reduced intake of fat, insoluble fibers, caffeine, and gas-producing foods, such as beans, cabbage, and onions), with greater emphasis on how and when to eat rather than on what foods to ingest (n = 37). Symptom severity was assessed using the IBS Symptom Severity Scale, and patients completed a 4-day food diary before and at the end of the intervention.

RESULTS: A total of 67 patients completed the dietary intervention (33 completed the diet low in FODMAPs, 34 completed the traditional IBS diet). The severity of IBS symptoms was reduced in both groups during the intervention (P < .0001 in both groups before vs at the end of the 4-week diet), without a significant difference between the groups (P = .62). At the end of the 4-week diet period, 19 patients (50%) in the low-FODMAP group had reductions in IBS severity scores ≥ 50 compared with baseline vs 17 patients (46%) in the traditional IBS diet group (P = .72). Food diaries demonstrated good adherence to the dietary advice.

CONCLUSIONS: A diet low in FODMAPs reduces IBS symptoms as well as traditional IBS dietary advice. Combining elements from these 2 strategies might further reduce symptoms of IBS. ClinicalTrials.gov ID NCT02107625.

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Risks Associated With Anesthesia Services During Colonoscopy.

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Abstract

BACKGROUND & AIMS: We aimed to quantify the difference in complications from colonoscopy with vs without anesthesia services.

METHODS: We conducted a prospective cohort study and analyzed administrative claims data from Truven Health Analytics MarketScan Research Databases from 2008 through 2011. We identified 3,168,228 colonoscopy procedures in men and women, aged 40-64 years old. Colonoscopy complications were measured within 30 days, including colonic (ie, perforation, hemorrhage, abdominal pain), anesthesia-associated (ie, pneumonia, infection, complications secondary to anesthesia), and cardiopulmonary outcomes (ie, hypotension, myocardial infarction, stroke), adjusted for age, sex, polypectomy status, Charlson comorbidity score, region, and calendar year.

RESULTS: Nationwide, 34.4% of colonoscopies were conducted with anesthesia services. Rates of use varied significantly by region (53% in the Northeast vs 8% in the West; $P < .0001$). Use of anesthesia service was associated with a 13% increase in the risk of any complication within 30 days (95% confidence interval [CI], 1.12-1.14), and was associated specifically with an increased risk of perforation (odds ratio [OR], 1.07; 95% CI, 1.00-1.15), hemorrhage (OR, 1.28; 95% CI, 1.27-1.30), abdominal pain (OR, 1.07; 95% CI, 1.05-1.08), complications secondary to anesthesia (OR, 1.15; 95% CI, 1.05-1.28), and stroke (OR, 1.04; 95% CI, 1.00-1.08). For most outcomes, there were no differences in risk with anesthesia services by polypectomy status. However, the risk of perforation associated with anesthesia services was increased only in patients with a polypectomy (OR, 1.26; 95% CI, 1.09-1.52). In the Northeast, use of anesthesia services was associated with a 12% increase in risk of any complication; among colonoscopies performed in the West, use of anesthesia services was associated with a 60% increase in risk.

CONCLUSIONS: The overall risk of complications after colonoscopy increases when individuals receive anesthesia services. The widespread adoption of anesthesia services with colonoscopy should be considered within the context of all potential risks.

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Ramosetron Reduces Symptoms of Irritable Bowel Syndrome With Diarrhea and Improves Quality of Life in Women.

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Author information

Abstract

BACKGROUND & AIMS: Previous studies have indicated that serotonin-3-receptor antagonists might have a sex-specific effect in patients with irritable bowel syndrome with diarrhea (IBS-D). Alosetron has been approved for the treatment of only women, and ramosetron has been approved for the treatment for only men. We performed a randomized, placebo-controlled, phase 3 study to determine whether ramosetron reduces symptoms of IBS-D in women.

METHODS: We performed a prospective study of 576 female outpatients with IBS-D (according to the Rome III criteria), from February 2013 through February 2014, at 70 academic Gastroenterology Departments in Japan. After a 1-week baseline period, subjects received either 2.5 µg ramosetron (n = 292) or placebo (n = 284) once daily for 12 weeks. Primary end points were the monthly rates of response for relief from overall IBS symptoms and increased stool consistency at the last evaluation point. Quality of life (QOL) also was quantified.

RESULTS: A significantly higher proportion of patients given ramosetron reported global improvement (50.7%; 95% confidence interval [CI], 44.8-56.6) than patients given placebo (32.0%; 95% CI, 26.7-37.8)--a difference of 18.6% (95% CI, 10.7-26.5; P < .001). The relative risk was 1.58 (95% CI, 1.29-1.94) and the number needed to treat was 6 (95% CI, 4-10). A significantly higher proportion of patients in the ramosetron group reported increased stool consistency (40.8%; 95% CI, 35.1%-46.6%) than in the placebo group (24.3%; 95% CI, 19.4%-29.7%)--a difference of 16.5% (95% CI, 8.9%-24.0%; P < .001). Patients receiving ramosetron had significant reductions in abdominal pain and discomfort (P = .001) and greater improvement in QOL (P = .002) compared with placebo. Ramosetron induced constipation in 11.0% of patients.

CONCLUSIONS: In a randomized, placebo-controlled study of 576 women with IBS-D, 2.5 µg ramosetron per day reduced symptoms and increased stool consistency and QOL. Clinicaltrials.gov no: [NCT01870895](https://clinicaltrials.gov/ct2/show/study/NCT01870895).

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