

做出 正確的 醫療決策

僅須透過 DynaMed®

本資訊圖表為互動式檔案，點擊帶有  圖示的部分，以獲取整個資訊圖表中的更多訊息。

為了提供最出色的醫療護理，臨床醫師必須對他們用於診斷和管理患者的訊息具備最大的信心。在很多時候，最好的臨床證據可以使您安心。但是臨床證據並不能總是為問題提供明確或可行的答案，在許多情況下，專家的指導反而是您所需要的。

無與倫比的
實證研究方法



系統文獻監控



臨床專業知識

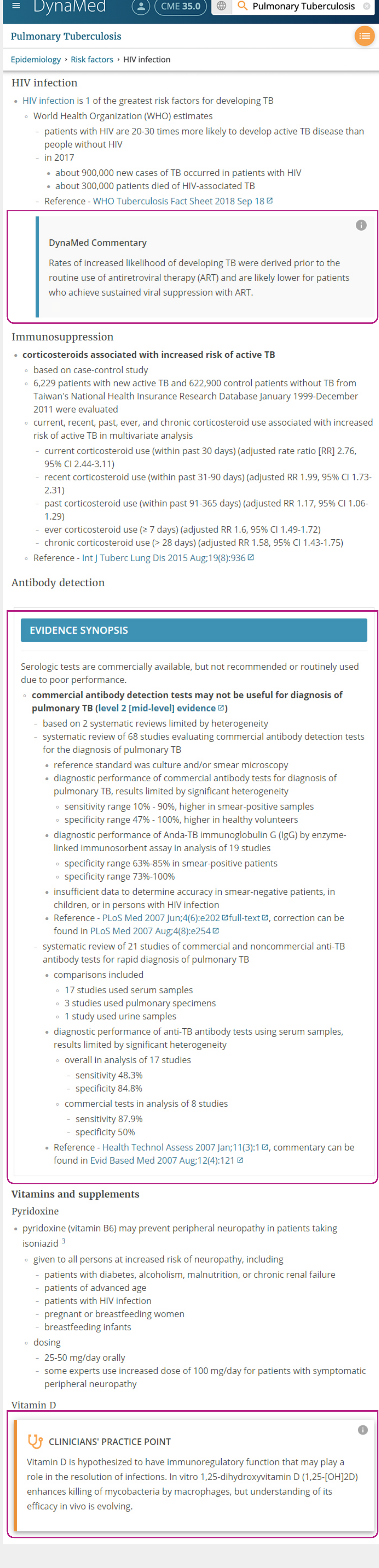
臨床醫師能夠
每次

都做出正確的

決策



讓我們探討DynaMed如何補充
並澄清證據



Pulmonary Tuberculosis

Epidemiology > Risk factors > HIV infection

HIV infection

- HIV infection is 1 of the greatest risk factors for developing TB
 - World Health Organization (WHO) estimates
 - patients with HIV are 20-30 times more likely to develop active TB disease than people without HIV
 - in 2017
 - about 900,000 new cases of TB occurred in patients with HIV
 - about 300,000 patients died of HIV-associated TB
 - Reference - WHO Tuberculosis Fact Sheet 2018 Sep 18 [↗](#)

DynaMed Commentary

Rates of increased likelihood of developing TB were derived prior to the routine use of antiretroviral therapy (ART) and are likely lower for patients who achieve sustained viral suppression with ART.

Immunosuppression

- corticosteroids associated with increased risk of active TB**
 - based on case-control study
 - 6,229 patients with new active TB and 622,900 control patients without TB from Taiwan's National Health Insurance Research Database January 1999-December 2011 were evaluated
 - current, recent, past, ever, and chronic corticosteroid use associated with increased risk of active TB in multivariate analysis
 - current corticosteroid use (within past 30 days) (adjusted rate ratio [RR] 2.76, 95% CI 2.44-3.11)
 - recent corticosteroid use (within past 31-90 days) (adjusted RR 1.99, 95% CI 1.73-2.31)
 - past corticosteroid use (within past 91-365 days) (adjusted RR 1.17, 95% CI 1.06-1.29)
 - ever corticosteroid use (≥ 7 days) (adjusted RR 1.6, 95% CI 1.49-1.72)
 - chronic corticosteroid use (> 28 days) (adjusted RR 1.58, 95% CI 1.43-1.75)
 - Reference - Int J Tuberc Lung Dis 2015 Aug;19(8):936 [↗](#)

Antibody detection

EVIDENCE SYNOPSIS

Serologic tests are commercially available, but not recommended or routinely used due to poor performance.

- commercial antibody detection tests may not be useful for diagnosis of pulmonary TB (level 2 [mid-level] evidence)**
 - based on 2 systematic reviews limited by heterogeneity
 - systematic review of 68 studies evaluating commercial antibody detection tests for the diagnosis of pulmonary TB
 - reference standard was culture and/or smear microscopy
 - diagnostic performance of commercial antibody tests for diagnosis of pulmonary TB, results limited by significant heterogeneity
 - sensitivity range 10% - 90%, higher in smear-positive samples
 - specificity range 47% - 100%, higher in healthy volunteers
 - diagnostic performance of Anda-TB immunoglobulin G (IgG) by enzyme-linked immunosorbent assay in analysis of 19 studies
 - specificity range 63%-85% in smear-positive patients
 - specificity range 73%-100%
 - insufficient data to determine accuracy in smear-negative patients, in children, or in persons with HIV infection
 - Reference - PLoS Med 2007 Jun;4(6):e202 [↗](#) [full-text ↗](#), correction can be found in PLoS Med 2007 Aug;4(8):e254 [↗](#)
 - systematic review of 21 studies of commercial and noncommercial anti-TB antibody tests for rapid diagnosis of pulmonary TB
 - comparisons included
 - 17 studies used serum samples
 - 3 studies used pulmonary specimens
 - 1 study used urine samples
 - diagnostic performance of anti-TB antibody tests using serum samples, results limited by significant heterogeneity
 - overall in analysis of 17 studies
 - sensitivity 48.3%
 - specificity 84.8%
 - commercial tests in analysis of 8 studies
 - sensitivity 87.9%
 - specificity 50%
 - Reference - Health Technol Assess 2007 Jan;11(3):1 [↗](#), commentary can be found in Evid Based Med 2007 Aug;12(4):121 [↗](#)

Vitamins and supplements

Pyridoxine

- pyridoxine (vitamin B6) may prevent peripheral neuropathy in patients taking isoniazid ³
 - given to all persons at increased risk of neuropathy, including
 - patients with diabetes, alcoholism, malnutrition, or chronic renal failure
 - patients of advanced age
 - patients with HIV infection
 - pregnant or breastfeeding women
 - breastfeeding infants
 - dosing
 - 25-50 mg/day orally
 - some experts use increased dose of 100 mg/day for patients with symptomatic peripheral neuropathy

Vitamin D

CLINICIANS' PRACTICE POINT

Vitamin D is hypothesized to have immunoregulatory function that may play a role in the resolution of infections. In vitro 1,25-dihydroxyvitamin D (1,25-[OH]2D) enhances killing of mycobacteria by macrophages, but understanding of its efficacy in vivo is evolving.

了解 DynaMed 的與眾不同



確保
臨床實務上的
信心



節省
時間



創造
個人化的體驗



無論何時何地，
都能提供協助



看看DynaMed的實際操作與應用

今天就訂閱

機構或醫院可申請免費試用

DynaMed®

dynamed.com