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The influence of pediatric tracheostomy on the body weight percentile of children

Original Research Article

*International Journal of Pediatric Otorhinolaryngology, Volume 91, December 2016, Pages 49-54*

Shereen Yankasari, Yoon Se Lee, Won Kyung Chang, Hyun Moon, Jiwon Kim, Jong-Lyel Roh, Seung-Ho Choi, Sang Yoon Kim, Soon Yuhl Nam

Abstract

PDF (342 K)
The influence of pediatric tracheostomy on the body weight percentile of children

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ARTICLE INFO

Article history:
Received 21 July 2016
Received in revised form
10 September 2016
Accepted 11 October 2016
Available online 14 October 2016

ABSTRACT

Objectives: The purpose of this study was to evaluate the changes in body weight following tracheostomy in pediatric patients.
Methods: Ninety-eight patients who underwent tracheostomy at the age of 0–6 years were enrolled. The body weight and growth percentile were measured before tracheostomy and at 1, 6, and 12 months after surgery. The body weight and growth percentile were plotted against time, which was compared with Korean growth chart curve. A Retrospective observational cohort study was performed.
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<td>BOOK</td>
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<td>Laser Imaging and Manipulation in Cell Biology</td>
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Comparing Surgeon Outcomes in Endoscopic Sinus Surgery for Chronic Rhinosinusitis

Timothy L. Smith, MD, MPH; Jess C. Mace, MPH, CCRP; Luke Rudmik, MD, MSc; Rodney J. Schlosser, MD; Peter H. Hwang, MD; Jeremiah A. Alt, MD, PhD; Zachary M. Soler, MD, MSc

Objectives/Hypothesis: The objective of this investigation was to evaluate endoscopic sinus surgery (ESS) outcomes for chronic rhinosinusitis (CRS) between medical centers to determine if differences in quality-of-life outcomes were detectable. In addition, we sought to identify significant, independent cofactors toward the development of an ESS-specific risk-adjustment model so that ESS outcomes may be appropriately compared between institutions and healthcare providers.

Study Design: Prospective, multicenter, observational cohort.

Methods: Study participants electing ESS for CRS were enrolled and randomly selected in equal numbers from three academic clinical practices in North America between April 2011 and May 2015. The magnitude of average 6-month postoperative improvement in patient-related outcome measures (PROMs) was compared between enrollment sites using multivariate linear regression modeling.

Results: A total of 228 participants met inclusion criteria and were included for final analyses (n = 76 per site). The prevalence of septal deviation/septoplasty and oral corticosteroid-dependent conditions was significantly different between enrollment sites (P ≤ 0.004). Each enrollment site generated significant within-subject improvement across all PROMs after ESS (P < 0.001); however, average unadjusted magnitudes of improvement were significantly different between sites for the primary outcome measure. After controlling for baseline PROMs, septal deviation, steroid-dependent conditions, and medication use variables, enrollment site was no longer associated with significant outcome differences (P = 0.535).

Conclusion: Comparison of surgeon outcomes of ESS is feasible and must take into account a number of baseline...
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توفر جميع النسخ التي تم طباعتها للصحيفة منذ عام 1888 م حتى عام 2009 م في أكثر من 700.000 صفحة يمكن البحث فيها وتصفحها. وكذلك سعت الصحيفة من مجال تغطيتها لتشمل مواضيع القضايا المالية والاقتصادية العالمية، والصناعة، والطاقة، والسياسة الدولية، وإدارة، والتمويل الشخصي، والفنون. ومحتوى الصحيفة متوفر لأكثر من مليون قارئ حول العالم.

هو مصدر موثوق في ذكر اتخاذ القرارات الصحية المبنية على الأدلة وليته بها جميع ممارسي الرعاية الصحية بينما يُقمن بالرعاية الصحية للمريض، حيث أن هناك أكثر من 6300 طبيب، ومجرر، ومراجع ممن يتمتعون بشهرة عالمية يكتبون موقع أندرويد ويتوجهون عملية تحرير دقيقة لأحدث المعلومات الطبية وادخالها في شكل توصيات موثوق بها وموثقة على الأدلة، والتي تثبت جدارتها في تحسين رعاية المرضى والجودة.

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