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コンテンツ:

Solid organ Transplantation(固形臓器移植) に関してのEvidence-Based Publications(根拠のある医療のための) 出版物を提供

8000以上のRandomized Controlled trial: RCT (ランダム化比較試験)

Medline, Cochrane Library, 会議議事録

さらに下記のコンテンツも収録されております。

2008年からの高品質なSystematic Reviewsとmeta analysis

2005年からのClinical practice guidelines

継続実験中のRCTs :

2004年からのRCTs (Jadad scoreを利用したmethodological quality ranking)

2014年6月からの専門家評論(Expert Commentaries)

(専門家による診療コメントを、論文について関連する診療情報や、他の研究や将来の研究のための課題等も含めて提供をさせていただいております。これらのコメントについては、その分野の専門家の方に記載させていただいており、診療現場及び将来の研究にとって大変重要なコンテンツを提供しております。)

The Centre for Evidence in Transplantation CET Conclusion等のイギリスの移植エビデンスセンターでの結論等も提示させていただいております。

Update: 2週間毎にRCTs, 4週間毎にSystematic ReviewsとClinical Practice Guidelineを更新

CONTENT PRODUCER (コンテンツ作成者) :

The Centre for Evidence in Transplantation

特記事項 : コクラン・コラボレーションにより推奨された唯一の固形臓器移植学分野の製品です。



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1. **Bariatric surgery and liver transplantation: a systematic review a new frontier for bariatric surgery**

Lazzati, A., Iannelli, A., Schneck, A-S, Nelson, A. C., Katsahian, S., Gugenheim, J., Azoulay, D. Obesity Surgery. 2015;25(1):134-42

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2. **Psychosocial impact of pediatric living-donor kidney and liver transplantation on recipients, donors, and the family: a systematic review**

Thys, K., Schwering, K-L, Siebelink, M., Dobbels, F., Borry, P., Schotsmans, P., Aujoulat, I. Transplant International. 2015;28(3):270-80

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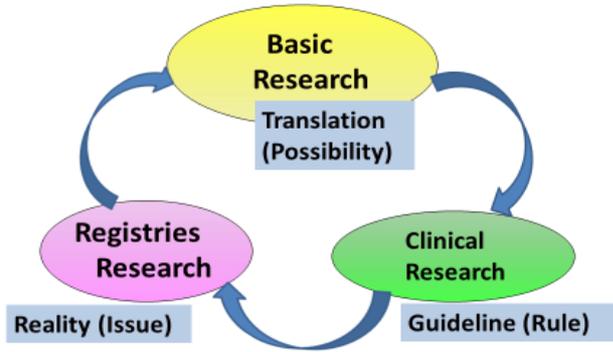
3. **Belatacept treatment for two yr after liver transplantation is not associated with operational tolerance**

Schwarz, C., Rasoul-Rockenschaub, S., Soliman, T., Berlakovich, G. A., Steininger, R., Muhlbacher, F., Wekerle, T. Clinical Transplantation. 2015;29(1):85-9

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医師が研究を続けなければならない理由



Transplant Library =
 移植に関わる登録研究のデータベース

移植に関わるRCTsを有する論文を
 CETの結論や専門家のレビュー付き
 で収集し提供

これらの登録研究の情報をもとに、次に
 どのような基礎研究に生かして行くかが
 非常に重要！

よりくわしい臨床家が利用可能な
 情報を提供

CET Conclusion (Centre for Evidence
 in Transplantation):CETの結論

Methodological quality
 (方法論の質) のレーティング

Study details: 研究詳細

Funding情報まで記載し
 利益相反に配慮

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Clinical Transplantation. 2015;29(1):85-9

Belatacept treatment for two yr after liver transplantation is not associated with operational tolerance

Schwarz, C.; Rasoul-Rockenschaub, S.; Soliman, T.; Berlakovich, G. A.; Steininger, R.; Muhlbacher, F.; Wekerle, T.

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Abstract

Belatacept was recently evaluated in liver transplantation (LT) in a phase II multicenter trial, which was terminated prematurely. Patients were more than two yr post-LT at the time. As high rates of spontaneous tolerance after LT have been reported and as belatacept has marked immunomodulatory effects, we decided to maintain the belatacept patients enrolled at our center (n = 4)

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CET Conclusion

Reviewer: Sir Peter Morris, Centre for Evidence in Transplantation, The Royal College of Surgeons of England.

In this study from Vienna, the authors report the outcome of eight patients who had been enrolled in the liver transplant belatacept trial which was discontinued during its long-term extension because of an unacceptable death and morbidity rate in the belatacept arm. Following discontinuation of belatacept, these four patients were switched to monotherapy with mycophenolate (2g/day) but this led [...Read more](#)

Methodological quality

Jadad score ① : 3

Allocation concealment ① : YES

Data analysis ① : MODIFIED INTENTION TO TREAT

Score based on ① : Klintmalm GB, Feng S, Lake JR, Vargas HE et al. Am J Transplant. 14(8):1817-27, 2014.

Study details

Aims : To evaluate liver and kidney function of belatacept treated liver transplant (LT) patients two years after the end of treatment (EOT). EOT was defined as the date of the next scheduled belatacept infusion after study termination as this time point indicates the loss of sufficient pharmacological efficacy of belatacept.

Interventions : At EOT participants were switched to Mycophenolate mofetil (MMF) monotherapy (1000 mg twice daily). Patients had previously been randomized to receive one of five regimens: Tacrolimus (TAC) only, TAC + MMF, belatacept high dose (HD) +

Funding ① : Industry funding

Publication type : Randomised Controlled Trial

Organ : Liver

Language : English

Author email : thomas.wekerle@meduniwien.ac.at

MeSH terms : Adrenal Cortex Hormones ; Adult ; Calcineurin Inhibitors ; Drug Administration Schedule ; Drug Therapy, Combination ; Early Termination of Clinical Trials ; Female ; Follow-Up Studies ; Graft Rejection ; Graft Rejection ; Humans ; Immunoconjugates ; Immunoconjugates ; Immunosuppressive Agents ; Immunosuppressive Agents ; Liver Transplantation ; Male ; Middle Aged ; Mycophenolic Acid ; Mycophenolic Acid ; Prospective Studies ; Transplantation Tolerance ; Treatment Outcome ; 0 (Adrenal Cortex Hormones) ; 0 (Calcineurin Inhibitors) ; 0 (Immunoconjugates) ; 0 (Immunosuppressive Agents) ; 7D0YB67S97 (abatacept) ; 9242ECW6R0 (mycophenolate mofetil) ; HU9DX48NOT (Mycophenolic Acid) ; liver transplantation

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