

IBS CME Isfahan

22.10.1401

Session 1 Scientific Resources

Who is Who ?

- Azam Teymoori
 - GI section, Internal Medicine Dept. Isfahan University of Medical Sciences
- AliReza Rahimi
 - Medical Informatics Dept. Isfahan University of Medical Sciences

Scenario 1

- A 45 years old dentist comes to my office with a plethora of medical records and diagnostic evaluations. He complains of abdominal pain with alternate bowel habit over the last two decades.
- Following searching in “Google” and using “ChatGPT” for new remedies of IBS, he found that Vibrating Capsule may help his problem during constipation periods.
- Also, his sister in UK informed him that some Functional Medicine doctors perform fecal transplant to resolve the problem at all and one of her friends used Homeopathy with favorable outcomes.

Question 1: Patient Education Resources

- 1-1 Patient education libraries
- 1-2 Application Prescription
- 1-3 Infodemics prevention
- 1-4 Patient Health Record (PHR)

1-1 Patient education libraries

- **Web MD** ([WebMD - Better information. Better health.](#))
- **Medline Plus** (<https://medlineplus.gov/>)
- **Medscape** (<https://www.medscape.com/>)
- **MayoClinic** (<https://www.mayoclinic.org/>)

1-2 Application Prescription

- **RXList** (<https://www.rxlist.com/>)
 - is an online medical resource of US prescription medications providing full prescribing information and **patient education**.
- **Drugs.com** (<https://www.drugs.com>)
 - is an online pharmaceutical encyclopedia that provides **drug information for consumers** and healthcare **professionals**, primarily in the United States.

1-3 Infodemics prevention

- **Misinformation** (اطلاعات غلط - خبر نادرست)
 - false information that is not intended to cause harm.
- **Disinformation** (اطلاعات غلط تعمدي – گمراه سازی - دروغ سازی)
 - false information that is intended to manipulate, cause damage, or guide people, organizations, and countries in the wrong direction.
- **Malinformation**
 - information that stems from the truth but is often exaggerated in a way that misleads and causes potential harm.

1-4 Patient Health Record (PHR)

Scenario 2

- One of your friends is a GP that works in his private office and asks you as a GI that is there any new medication beyond Mesalamine 500 bid for “Mucous Colitis “ at all.

Question 2 :Care Provider Resources

- 2-1- Clinical questions: Background vs. PICO
- 2-2- Tertiary EBM resources and practice portals
- 2-3- CPGs and clinical pathways
- 2-4- Being updated: self- vs. informationist-assisted

2-1- Clinical questions: Background vs. PICO

Background Questions

- Asks for general knowledge about a disease or disease process
- Have two essential components:
 - A question root (who, what, when, etc.) with a verb
 - A disorder, test, treatment, or other aspect of healthcare
 - Example: *What causes Mucous Colitis ?* or *How often should women over the age of 40 have a mammogram?*

2-1- Clinical questions: Background vs. PICO

Foreground questions

- Ask for specific knowledge about managing patients with a disease
- Have 3 or 4 essential components
 - **P** = Population or Problem
 - How would I describe the problem or a group of patients similar to mine?
 - **I** = Intervention
 - What main intervention, prognostic factor or exposure am I considering?
 - **C** = Comparison
 - Is there an alternative to compare with the intervention?
 - **O** = Outcome
 - What do I hope to accomplish, measure, improve, or affect?

2-2- Tertiary EBM resources and practice portals

- Pubmed
- Embase
- TRIP Database
- Cochrane Library
- Clinical Key

2-4- Being updated: self- vs. informationist-assisted

