

Partes del trabajo final (2 HORAS)

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Dos documentos diferentes

- ▶ **Anteproyecto**
- ▶ **Informe Final**

Informe Final

- ▶ Título
- ▶ Autores
- ▶ Filiación
- ▶ Resumen
- ▶ Palabras clave
- ▶ Abstract y keywords
- ▶ Introducción
- ▶ Materiales y métodos
- ▶ Resultados
- ▶ Discusión
- ▶ Conclusiones
- ▶ Recomendaciones
- ▶ Agradecimientos
- ▶ Bibliografía
- ▶ Anexos

Título

- ▶ Debe ser preciso e informativo, debe estar centrado, escrito en negrilla, sin abreviaturas y en lo posible no superar las 15 palabras.
- ▶ Los nombres en latín se escriben en cursiva.
- ▶ El título se escribe tanto en inglés como en español (No se pone la palabra título).

Importancia del Título

- ▶ Puede ser tan importante como el trabajo mismo
- ▶ Le da fuerza a la investigación
- ▶ Hay mil formas de escribirlo!
- ▶ Formas de plantear un título
 - ▶ Una pregunta
 - ▶ Una aseveración
 - ▶ Qué se hizo?

Consejos para el título

- ▶ Títulos muy largos aburren al editor, a los árbitros y a los lectores
- ▶ Títulos muy cortos sugieren demasiada amplitud en lo que se aborda, generalmente reservado a revisiones

Títulos de títulos

- ▶ Sensacionalista
 - ▶ Ej, haces una pregunta fuerte que en el estudio es respondida en forma convencional
- ▶ Modismos y frases llamativas
 - ▶ Ej, Chagas disease, forgotten but not gone!
- ▶ Tipo de publicación y naturaleza del título

Ejemplos

- ▶ Histopathological evidences of polymorphonuclear neutrophils infiltration intensity as consequence of *Entamoeba histolytica* density in amebic colitis.
- ▶ Influence of mother VDRL titers on the outcome of newborns with congenital syphilis.
- ▶ Are the glycosylated hemoglobin levels (HbA1c) higher in type 2 diabetes patients with *Helicobacter pylori* infection?
- ▶ Knowledge, Attitudes and Practices evaluation about Travel Medicine in International Travelers and Medical Students in Chile.
- ▶ Pin-site myiasis: a rare complication of a treated open fracture of tibia.
- ▶ Chagas Disease Screening among Latin American Immigrants in Non-endemic Settings.

Ejemplos

- ▶ Malaria mortality in Venezuela: focus on deaths due to *Plasmodium vivax* in children.
- ▶ Atypical *Plasmodium vivax* Malaria in a Traveler: Bilateral Hydronephrosis, Severe Thrombocytopenia, and Hypotension.
- ▶ Maxillo-Facial Rosai-Dorfman Disease in a Newly Diagnosed HIV-Infected Patient.
- ▶ Paracoccidioidomycosis of the Larynx Mimicking Carcinoma.
- ▶ Preliminary Evidences of the Nitazoxanide Activity on *Toxocara canis* in a Mice Model.
- ▶ Haemoglobin and haematocrit: the threefold conversion is also non valid for assessing anaemia in *Plasmodium vivax* malaria-endemic settings.
- ▶ Congenital Syphilis in Valera, Venezuela.

Ejemplos

- ▶ Chagas Disease: An Impediment in Achieving the Millennium Development Goals in Latin America.
- ▶ Cardiac Manifestations of Parasitic Infections Part 1: Overview and Immunopathogenesis.
- ▶ Cardiac Manifestations of Parasitic Infections Part 2: Parasitic Myocardial Disease.
- ▶ Cardiac Manifestations of Parasitic Infections Part 3: Pericardial and Miscellaneous Cardiopulmonary Manifestations.
- ▶ Outcomes of Imported Malaria during Pregnancy within Venezuelan Status: Implications for Travel Advice.
- ▶ Rapid Development of Auricular Infection Due to Imipenem-Resistant *Pseudomonas aeruginosa* following Self-Administered Piercing of High Ear.

Autores

- ▶ Corresponde a los autores del trabajo, es posible incluir el asesor, pero indicándolo claramente como filiación (No se pone la palabra Autores).

Filiación

- ▶ Corresponde a la filiación de los autores, incluyendo la entidad, el grupo de investigación al que pertenecen, el programa, la dirección y el contacto web del autor principal (No se pone la palabra filiación).
- ▶ La filiación debe ser indicada con superíndice y corresponder a un autor.

FILIACIÓN

- ▶ Donde más errores se cometen
- ▶ Forma como se identifica a :
 - ▶ Investigador
 - ▶ Institución
 - ▶ Ciudad, País
- ▶ Permite evaluar su producción científica
- ▶ No traducir si no existe una versión oficial traducida

Antes de empezar!

- ▶ Diseñe un plan!
- ▶ Seleccione la revista
- ▶ Considere los requisitos de la revista y las Instrucciones a los Autores
- ▶ Pautas para reportar datos (STROBE, STARD, CONSORT, etc)
- ▶ Autoría

Criterios de Autoría

- ▶ Autores honorarios (guest or gift authors)
 - ▶ Jefe de servicio, autoridad
- ▶ Autor fantasma (ghost authors)
 - ▶ Omisión de alguien que debe ser autor
 - ▶ *Ghost authorship may be very common – one recent study showed evidence of ghost authorship in 75% of 44 industry-initiated clinical trials* [Gotzsche PC et al. (2007) Ghost authorship in industryinitiated randomized trials. PLoS Medicine 4 (1).]
- ▶ Autor “gofer” (“go for”)
 - ▶ “Very junior”

Ejemplos de Duda Autorial

- ▶ Case report con 14 autores!!!!
- ▶ Un estudio original complejo con un solo autor!!!! (min. 4-5)
- ▶ Cooperaciones problemas en...
 - ▶ 1) Emerg Inf Dis – Leishm Colombia
 - ▶ 2) J Inf Dev Count – IVDA Vietnam
- ▶ Ética

Contribuciones no Autoriales

- ▶ Agradecimientos a personas
- ▶ Otros tipos de agradecimientos

FILIACIÓN: Persona

Forma de envío a la revista	Forma de aparición
Juan Segundo Palotes Fulano	Fulano JSP
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Juan Palotes	Palotes J
Juan Segundo Palotes	Palotes JS

Mayta-Tristán P. Quien es el autor? Aspectos a tener en cuenta en la redacción de artículos estudiantiles.
CIMEL 2006; 11(2): 50-52

Search PubMed for Display AbstractPlus Show 20 Sort by Send toAll: 1 Review: 0 1: [J Clin Microbiol.](#) 2005 Jun;43(6):2764-70. Full Text FREE [J Clin Microbiol](#) FREE full text article in PubMed Central [Links](#)**Comparative analysis of the diagnostic performance of six major Echinococcus granulosus antigens assessed in a double-blind, randomized multicenter study.**[Lorenzo C](#), [Ferreira HB](#), [Monteiro KM](#), [Rosenzvit M](#), [Kamenetzky L](#), [Garcia HH](#), [Vasquez Y](#), [Naquira C](#), [Sanchez E](#), [Lorca M](#), [Contreras M](#), [Last JA](#), [Gonzalez-Sapienza GG](#).

Catedra de Inmunologia, AV. A. Navarro 3051, 11600 Montevideo, Uruguay.


The serodiagnosis of hydatid disease is a valuable instrument for clinical diagnosis and epidemiological surveillance of high-risk populations. In the past decade a wealth of reports on the diagnostic performance of numerous antigens have been produced. However, their diagnostic value has been estimated under different conditions, using different serum collection, therefore precluding their direct comparison. Here we report an unbiased comparison of the same batch of six major E. granulosus antigens, namely, hydatid cyst fluid (HCF), native antigen B (AgB), two recombinant AgB subunits, an AgB-derived synthetic peptide, and recombinant cytosolic malate dehydrogenase from E. granulosus (EgMDH), against the same serum collection. The double-blind analysis was performed using a standardized protocol and receiver operating characteristic (ROC) data analysis by a network of six South American laboratories. High intercenter reproducibility was attained, and the intralaboratory analysis allowed the comparative ranking of the antigen panel. HCF, AgB, and its AgB8/1 subunit exhibited equivalent diagnostic

Related Links

- ▶ Improved immunodiagnosis of cystic hydatid disease by using a synthetic peptide with ↑ [J Clin Microbiol. 2000]
- ▶ Expression and immunological characterisation of Echinococcus granulosus recombinant [Acta Trop. 1997]
- ▶ Diagnostic evaluation of a synthetic peptide derived from a novel antigen B subunit [Parasite Immunol. 1998]
- ▶ Alkaline phosphatase from Echinococcus granulosus metacestodes for immunodia [J Egypt Soc Parasitol. 2004]
- ▶ The immunodiagnostic potential of Echinococcus granulosus adult-worm antigens in ↑ [Parasitol Res. 1997]
- ▶ [See all Related Articles...](#)

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1: [Rev Gastroenterol Peru.](#) 2003 Jan-Mar;23(1):29-35. [Links](#)

[Human blastocystosis: prospective study symptomatology and associated epidemiological factors]

[Article in Spanish]

[Barahona Rondon L](#), [Maquina Vargas C](#), [Naquira Velarde C](#), [Terashima I A](#), [Tello R](#).

Universidad Peruana Cayetano Heredia, Lima, Peru.

An attempt has been made to contribute to the understanding of the symptoms and factors associated with the Blastocystis Hominis infection, as seen in persons seeking outside consultation from the Dermatological and Transmissible Diseases Department (DTDD) at the C.H.N.H. This is a case-control study carried out in people between the ages of 5 and 80 in a period from January to March 1999. The cases tested positive in parasitological tests for Blastocystis Hominis and were absent of other enteropathogens. The controls tested negative in parasitological tests for Blastocystis Hominis and were absent of other enteropathogens. A clinical chart was used to register details of symptomatology and factors associated with the Blastocystis Hominis infection. 74 cases and 70 controls were studied, matched by sex and age. A statistical correlation was obtained ($p < 0.05$) among symptomatic

- Related Links**
- ▶ [\[Clinical significance of Blastocystis hominis infection: epidemiologic : \[Med Clin \(Barc\). 1997\]](#)
 - ▶ [\[Blastocystis hominis in Canavese: a retrospective stL \[G Bacteriol Virol Immunol. 1991\]](#)
 - ▶ [Evidence of waterborne transmission of Blastocystis hominis. \[Am J Trop Med Hyg. 2004\]](#)
 - ▶ [Blastocystis hominis in human immunodeficiency v \[Scand J Gastroenterol. 1995\]](#)
 - ▶ [\[Importance of the diagnosis of Blastocystis hominis in the par. \[Rev Latinoam Microbiol. 1991\]](#)
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1: [Rev Soc Bras Med Trop.](#) 2005;38 Suppl 2:55-7. [Links](#)

[Chagas disease in Peru: congenital transmission]

[Article in Spanish]

[Velarde CN.](#)

Universidad Ricardo Palma, Instituto Nacional de Salud del Peru, Lima. cnaquira@ins.gob.pe

American Trypanosomiasis is an important parasitic infection in Peru. Human cases, reservoirs and vectors have been showed in two known geographic areas in the endemic zones: southwestern and northern and northeastern regions of the country; however vectors belonging to the three genera of triatominae: *Triatoma*, *Panstrongylus* and *Rhodnius* have been collected in almost all the territory. The serological surveys in blood banks in the southwestern region is 2-6% and human cases found out of the endemic areas show the possibility of congenital cases. The study of the prevalence is starting. This preliminary study performed on 3000 pregnant of Arequipa shows serological positives in 22 (0.7%) and only a newborn positive at IgM. This result indicates a probable low rate of congenital transmission and necessary to perform more studies.

PMID: 16482815 [PubMed - indexed for MEDLINE]

Related Links

- ▶ [\[The prevalence of Chagas' disease in puerperal women and congenital tr. \[Rev Panam Salud Publica. 2005\]](#)
- ▶ [High prevalence of congenital Trypanosoma cruzi infection and family clustering in Salta. \[Pediatrics. 2005\]](#)
- ▶ [\[Endemic level of congenital Trypanosoma cruzi infection in the areas of m. \[Rev Soc Bras Med Trop. 2005\]](#)
- ▶ [\[Congenital transmission of Trypanosoma cruzi in Brazil: estimation of preva \[Rev Soc Bras Med Trop. 2005\]](#)
- ▶ [A survey of congenital Chagas' disease, carried out at three health institutor \[Rev Inst Med Trop Sao Paulo. 1999\]](#)
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Cual es mi nombre científico?

- ▶ Ya he publicado antes?
- ▶ Tengo homónimos? (ver todas las fórmulas)
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 - ▶ en publicación:
 - ▶ www.scholar.google.com
 - ▶ www.ncbi.nlm.nih.gov/sites/entrez
- ▶ Otras preguntas:
 - ▶ Mi nombre es muy largo?
 - ▶ Tengo segundo nombre?
 - ▶ Quiero mucho a mi mami 😊

Resumen

- ▶ Debe tener un máximo de 500 palabras y contener la información necesaria para darle al lector una idea precisa de la pertinencia y calidad del trabajo, se debe incluir el resumen de todo el trabajo enfatizando en los objetivos, los resultados y las conclusiones (se pone el subtítulo resumen y se redacta en el siguiente renglón).

Palabras Clave

- ▶ Se sugiere presentar máximo 5 palabras clave que no estén en el título y que se encuentren en un tesoro del área (se pone el subtítulo Palabras clave y después de dos puntos se organizan en orden alfabético).

Abstract and keywords

- ▶ Corresponde al resumen en inglés (se pone el subtítulo Abstract y se redacta en el siguiente renglón).
- ▶ Las 5 palabras clave en inglés

El resumen o abstract

- ▶ Esquema IMRYD – Estructurado
 - ▶ Con o sin indicación de secciones
- ▶ Extension
 - ▶ De acuerdo al tipo de manuscrito
 - ▶ En general, originales: 250 palabras (excepciones >250, otros 200)
 - ▶ Short report, artículos breves: 150-200 palabras
 - ▶ Reportes de caso: 50-150 palabras
 - ▶ Cartas al editor y editoriales: No llevan resumen.
- ▶ Calidad y contenido
- ▶ Palabras Clave
- ▶ ¿Cuándo se escribe?

El resumen o abstract

- ▶ Diferencia entre un resumen para un artículo con uno para una revista
- ▶ No deben usarse “trucos” de espaciado para alcanzar estar por debajo del límite de palabras
 - ▶ Ejemplo:
 - ▶ 250(65%)niños [indebido, 1 palabra]
 - ▶ 250 niños (65%) [debido, 3 palabras]
- ▶ Lo más importante: que sea informativo del artículo

IMPACT OF CLIMATE VARIABILITY IN THE OCCURRENCE OF LEISHMANIASIS IN NORTHEASTERN COLOMBIA

ROCIO CARDENAS, CLAUDIA M. SANDOVAL, ALFONSO J. RODRÍGUEZ-MORALES, AND
CARLOS FRANCO-PAREDES*

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Abstract. Previous studies have shown that variation in the distribution of vectors associated to the transmission of *Leishmania* species may be related to climatic changes. However, the potential implications of these ecological changes in human health need to be further defined in various endemic populations where leishmaniasis carries a substantial burden of disease such as in Northeastern Colombia. Herein, we report the impact of El Niño Southern Oscillation climatic fluctuations during 1985–2002 in the occurrence of cases of leishmaniasis in two northeastern provinces of Colombia. During this period, we identified that during El Niño, cases of leishmaniasis increased, whereas during La Niña phases, leishmaniasis cases decreased. This preliminary data show how climatic changes influence the occurrence of leishmaniasis in northeastern Colombia and contributes to the growing body of evidence that shows that the incidence of vector-borne diseases is associated with annual changes in weather conditions.

SHORT REPORT: PREGNANCY OUTCOMES ASSOCIATED WITH *PLASMODIUM VIVAX* MALARIA IN NORTHEASTERN VENEZUELA

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Abstract. Although *Plasmodium vivax* is increasingly recognized as an important cause of morbidity in pregnancy in low malaria–transmission areas of Asia, little is known about the epidemiologic and clinical profiles of *P. vivax* in pregnant women in Latin America. We describe the clinical features and pregnancy outcomes in a series of 12 cases of *P. vivax* malaria in pregnant women complicated in some by miscarriage or preterm deliveries and in others with significant degrees of anemia and thrombocytopenia in a population where *P. vivax* is endemic in northeastern Venezuela.

Summary

Parasitic infections produce a wide spectrum of cardiac manifestations. They may involve various anatomic structures of the heart and are manifested clinically as myocarditis, cardiomyopathies, pericarditis, or pulmonary hypertension in many resource-constrained settings. However, many parasitic infections involving the heart may also be currently diagnosed in developed countries due to growing worldwide travel, blood transfusions, and increasing numbers of immunosuppression states such as organ transplantation, use of immunosuppressive agents, or HIV/AIDS. Clinicians anywhere in the globe need to be aware of the potential cardiac manifestations of parasitic diseases. This is part one of a three-part series discussing parasites of the heart. In this section, we provide a general overview and immunopathogenesis of parasitic infections of the heart.

Key words: heart, parasites, Chagas disease, pericardium, myocardium

Clin. Cardiol. 2007; 30: 195–199.
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Historically, the epidemiologic pattern of cardiac diseases varies between resource-constrained and resource-rich countries.^{1–5} However, cardiac manifestations previously seen only in resource-constrained countries, including certain parasitic infections, can be currently diagnosed anywhere in the globe.^{6–24} These epidemiologic transitions have been favored by multiple factors: (i) growing travel and immigration^{5,11,12,20,21}; (ii) worldwide spread of the acquired immunodeficiency syndrome (HIV/AIDS) epidemic^{8–10}; and (iii) growing number of organ transplantation, increased use of immunosuppressive agents, and blood transfusions.^{11,14–18}

Parasitic infections due to protozoa and helminths

Received 15 April 2005; Revised 30 April 2005; Accepted 7 December 2005

Introduction. Intestinal parasitic infections, especially due to helminths, increase anemia in pregnant women. The results of this are low pregnancy weight gain and IUGR, followed by LBW, with its associated greater risks of infection and higher perinatal mortality rates. For these reasons, in the setting of no large previous studies in Venezuela about this problem, a national multicentric study was conducted. *Methods.* Pregnant women from nine states were studied, a prenatal evaluation with a coproparasitological study. Univariate and multivariate analyses were made to determine risk factors for intestinal parasitosis and related anemia. *Results.* During 19 months, 1038 pregnant women were included and evaluated. Intestinal parasitosis was evidenced in 73.9%: *A lumbricoides* 57.0%, *T trichiura* 36.0%, *G lamblia* 14.1%, *E histolytica* 12.0%, *N americanus* 8.1%, *E vermicularis* 6.3%, *S stercoralis* 3.3%. Relative risk for anemia in those women with intestinal parasitosis was 2.56 ($P < .01$). *Discussion.* Intestinal parasitoses could be associated with conditions for development of anemia at pregnancy. These features reflect the need of routine coproparasitological study among pregnant women in rural and endemic zones for intestinal parasites. Further therapeutic and prophylactic protocols are needed. Additional research on pregnant intestinal parasitic infection impact on newborn health is also considered.

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Las Palabras Clave

- ▶ Importancia
- ▶ Citas y referencias
- ▶ Necesidad de localizarlas en las bases de datos
- ▶ BIREME y los DeCS
 - (multiplicidad de idiomas, ESP, ENG, POR; y equivalencias)
- ▶ NLM, Medline y los MeSH
- ▶ Estrategias



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Consulta al DeCS



Idioma de los Descriptores Inglés Español Portugués

Consulta por Palabra

- Palabra o Término
 Descriptor Exacto

Consulta

Consulta por Índice

- Alfabético
 Permutado
 Jerárquico

Índice

Para configurar el idioma de la interfaz y la presentación de los resultados

Config

Nueva Consulta Config V

Expresión de búsqueda: VITAMINA C

Descriptores Encontrados: 1

Mostrando: 1 .. 1

1 / 1

DeCS

Descriptor Inglés: **Ascorbic Acid**

Descriptor Español: **Ácido Ascórbico**

Descriptor Portugués: **Ácido Ascórbico**

Sinónimos Español: Vitamina C

Categoría: [D02.241.081.844.107](#)
[D02.241.511.902.107](#)
[D09.811.100](#)

Definición Español: Un compuesto de seis carbonos relacionado con la [glucosa](#). Se encuentra en la [naturaleza](#) en los cítricos y en uchos [vegetales](#). El [ácido ascórbico](#) es un nutriente esencial en la [dieta](#) humana y es necesario para mantener el [tejido conectivo](#) y el hueso. Su forma biológicamente activa, la vitamina C, funciona como agente reductor y como coenzima en varias vías metabólicas. La vitamina C es considerada como antioxidante.

Nota de Indización Español: /defic = [DEFICIENCIA DE ACIDO ASCORBICO](#) o [ESCORBUTO](#)

Acción Farmacológica: [Antioxidantes](#)
[Vitaminas](#)

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Introducción

- ▶ Consiste en la descripción y presentación general del tema, comúnmente suele llevar el planteamiento del problema, la justificación y el marco teórico.
- ▶ El párrafo final de la introducción incluirá el objetivo general del trabajo (se pone el subtítulo Introducción y se redacta en el siguiente renglón).

Materiales y métodos

- ▶ Incluye criterios de diseño del experimento, de confiabilidad, de población, muestra, instrumentos y elementos pertinentes.
- ▶ Se debe tener en cuenta la redacción en tiempo pasado (se pone el subtítulo materiales y métodos y se redacta en el siguiente renglón).

Resultados y discusión

- ▶ Pueden tomarse como unidades juntas o separadas y se debe redactar en tiempo pasado (se pone el subtítulo resultados y discusión y se redacta en el siguiente renglón).

Conclusiones y recomendaciones

- ▶ Se redactan los hallazgos más importantes del trabajo y se dan las recomendaciones para futuros trabajos (se pone el subtítulo Conclusiones y recomendaciones y se redacta en el siguiente renglón).

Agradecimientos

- ▶ Se presenta agradecimientos a las personas y entidades que facilitaron el desarrollo del proyecto, no se deben incluir los autores del trabajo (se pone el subtítulo Agradecimientos y se redacta en el siguiente renglón).

Bibliografía

- ▶ Deben numerarse consecutivamente según el orden en que se mencionen por primera vez en el texto. Se deben incluir sólo las referencias citadas, según las normas Vancouver, para esto se recomienda el uso del asistente de referencias Mendeley (de licencia gratuita).

Anexos

- ▶ En esta sección se presenta material de soporte (Tablas extensas, figuras, dibujos, entre otras)