



Sobre el Título, Resumen y Palabras Clave

PROF. ALFONSO J. RODRÍGUEZ-MORALES, MD, MSC, DTM&H, FRSTM&H(LON), FFTM RCPS(GLASG), FACE, PHD(C).

Original articles: Body of the manuscript



Introduction

Since the 1990s, there has been substantial growth in the volunteer tourism market, partly due to the increasing variety in available volunteer experiences.¹ In the United Kingdom alone, it is thought that 230,000 young people take gap years, 90,000 people take career breaks, and 200,000 people travel in their retirement.²

Methods

Design

A cross-sectional questionnaire was used to assess short-term volunteers' health overseas and on return to the UK.

Setting

InterHealth is a specialist travel clinic in London with charitable status, providing medicals, vaccinations, travel supplies, and psychological support predominantly to those working overseas in the relief and development sector.

Results

Response rate

Since completion of the questionnaire was compulsory, an overall response rate of 100% was achieved. Within the questionnaire, the response rate ranged from 67.6% to 100% to individual questions.

From the 426 completed forms, one patient was excluded as they completed the post-travel health questionnaire in

Discussion

This cross-sectional questionnaire study of 413 participants is the largest study of the health of short-term overseas volunteers to developing countries to date. Other studies have used similar questionnaire methodologies but have had different populations of older aid, humanitarian and health workers on longer assignments.^{5,7}

Partes e Ideales

- ▶ Introducción
 - ▶ Por qué lo hacemos? 1 pag (nunca >3)
- ▶ Métodos
 - ▶ Cómo lo hicimos? 2-3 pag (nunca <0,5)
- ▶ Resultados
 - ▶ Qué encontramos? 2-3 pag (mas de 4?)
- ▶ Discusión
 - ▶ Qué significa todo? >2 pag (nunca <2)

Partes e Ideales

- ▶ Referencias
 - ▶ Calidad de ellas
 - ▶ Mas relevante y mas reciente
 - ▶ 20 a 35 referencias (depende del tipo de trabajo o articulo)
- ▶ Cuadros y Figuras
 - ▶ Visualización de los resultados
 - ▶ 3 a 6 cuadros y figuras (varia segun tipo de articulo)

Partes e Ideales

- ▶ En total, de 12 a 20 páginas!

Calidad

Exito en la publicación

Un orden lógico

- ▶ 1. El Cuerpo del Manuscrito
 - ▶ A. Autores/Filiación
 - ▶ B. Introducción (+Referencias)
 - ▶ C. Materiales y Métodos (+Cuadros y Figuras)
 - ▶ D. Resultados (+Cuadros y Figuras)
 - ▶ E. Discusión (+Referencias)
 - ▶ F. Agradecimientos/Reconocimientos (Personas/Trabajo)
 - ▶ G. Declaraciones (Conflicto, éticas, financieras, contribuciones)
- ▶ 2. El Resumen
- ▶ 3. Palabras Clave
- ▶ 4. Título

Ahora que tengo todo
escrito

▶ Viene el resumen!!!

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*

Instituto Departamental de Salud de Norte de Santander, Cucuta, Colombia; Instituto Experimental Jose Witremundo Torrealba (formerly Centro Trujillano de Investigaciones Parasitológicas JWT), Universidad de Los Andes, Trujillo, Venezuela; Grupo de Investigación en Enfermedades Parasitarias, Tropicales e Infecciosas, Instituto de Investigación en Ciencias Biomédicas, Universidad de Pamplona, Pamplona, Norte de Santander, Colombia; Division of Infectious Diseases, Emory University, Atlanta, Georgia; Hospital Infantil de México, Federico Gómez, Mexico City, Mexico

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

ALFONSO J. RODRIGUEZ-MORALES, ELIA SANCHEZ, MIGUEL VARGAS, CARMELINA PICCOLO, ROSA COLINA, MELISSA ARRIA, AND CARLOS FRANCO-PAREDES*

Instituto Experimental José Witremundo Torrealba, Universidad de Los Andes, Trujillo, Venezuela; Infectious Diseases Service, Hospital Santos Anibal Dominicci, Carúpano, Sucre, Venezuela; Division of Infectious Diseases, Emory University, Atlanta, Georgia; Hospital Infantil de México, Federico Gómez, Mexico City, Mexico

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.
© 2007 Wiley Periodicals, Inc.

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.

Copyright © 2006 Alfonso J. Rodríguez-Morales et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

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



biblioteca
virtual em saúde

DeCS

Descriptores en Ciencias de la Salud

[english](#) | [português](#)

- **Acerca del DeCS**
- **Consulta al DeCS**
- **Novedades del DeCS**
 - DeCS edición 2008
 - DeCS ediciones anteriores
- **Servicio de Atención al Usuario DeCS**





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](#)Precoord Español: [Ácido Ascórbico/deficiencia](#) use [Deficiencia de Ácido Ascórbico](#)
 Calificadores Permitidos Español: [análogos & derivados](#) [administración & dosificación](#)
[efectos adversos](#) [agonistas](#)
[antagonistas & Inhibidores](#) [análisis](#)
[biosíntesis](#) [sangre](#)



A service of the [U.S. National Library of Medicine](#) and the [National Institutes of Health](#)



All Databases PubMed Nucleotide Protein Genome Structure OMIM PMC Journals Books

Search PubMed for Go Clear [Advanced Search \(beta\)](#)

Limits Preview/Index History Clipboard Details

To get started with PubMed, enter one or more search terms.

Search terms may be [topics](#), [authors](#) or [journals](#).

The NIH Public Access Policy May Affect You

Does NIH fund your work?

Then your manuscript must be made available in PubMed Central

How?

If you publish in one of [these journals](#), they will take care of the whole process.

If you publish *anywhere else*, deposit the manuscript in PubMed Central via one of the options described at [publicaccess.nih.gov](#).

PubMed is a service of the [U.S. National Library of Medicine](#) that includes over 18 million citations from MEDLINE and other life science journals for biomedical articles back to the 1950s. PubMed includes links to full text articles and other related resources.

- About Entrez
- Text Version
- Entrez PubMed
- Overview
- Help | FAQ
- Tutorials
- New/Noteworthy
- E-Utilities
- PubMed Services
- Journals Database
- MeSH Database
- Single Citation
- Matcher
- Batch Citation Matcher
- Clinical Queries
- Special Queries
- LinkOut
- My NCBI

Related Resources

- Order Documents
- NLM Mobile
- NLM Catalog
- NLM Gateway

Y por último!!!



▶ **El 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.



*Most of my successes have come
out of failures*

Charles Town
(Nobel por desarrollo del LASER, 1995)

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

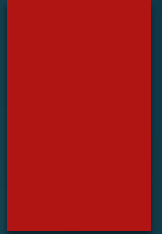
RÓCIO CARDENAS, CLAUDIA M. SANDOVAL, ALFONSO J. RODRÍGUEZ-MORALES, AND
CARLOS FRANCO-PAREDES*

Instituto Departamental de Salud de Norte de Santander, Cucuta, Colombia; Instituto Experimental Jose Witremundo Torrealba (formerly Centro Trujillano de Investigaciones Parasitológicas JWT), Universidad de Los Andes, Trujillo, Venezuela; Grupo de Investigación en Enfermedades Parasitarias, Tropicales e Infecciosas, Instituto de Investigación en Ciencias Biomédicas, Universidad de Pamplona, Pamplona, Norte de Santander, Colombia; Division of Infectious Diseases, Emory University, Atlanta, Georgia; Hospital Infantil de México, Federico Gómez, Mexico City, Mexico

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.

12 palabras

Taller para realización de Títulos y Palabras





Glasgow, Escocia, RU
Noviembre 2010



Fellow en
Medicina del Viajero
Faculty of Travel Medicine, RCPSG



Londres, Inglaterra, RU
Noviembre 2010