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КАЗАХСКИЙ НАЦИОНАЛЬНЫЙ МЕДИЦИНСКИЙ
УНИВЕРСИТЕТ ИМЕНИ С.Д.АСФЕНДИЯРОВА

Школа Фармации
Кафедра: Политика и управление здравоохранением с курсом
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Дисциплина: Доказательная медицина

Проект на тему: Научные статьи в электронных базах об эффективности вакцинации против пневмонии

Выполнил: Ан Владимир Сергеевич

Курс: 4

Группа: ФА14-002-1

Преподаватель: Те Надежда Викторовна

Алматы, 2018 гг.

Проблема:

- Пневмококковая пневмония является наиболее частой формой пневмонии. В стационаре у пациентов с ревматоидным артритом и без него, необходима профилактика, а именно вакцинация против пневмонии, для предотвращения развития пневмококковой инфекции. Так как в ходе плановой проверки лечебно- профилактического учреждения выявлен факт увеличения уровня Streptococcus pneumoniae.

По PICO

- P- Пациенты с ревматоидным артритом.
- I- Вакцинация против пневмонии.
- C- Сравнение эффективности вакцины против пневмонии у больных с ревматоидным артритом и без данного заболевания.
- O- Предотвращение развития пневмонии в ЛПУ

Базовый вопрос

- Следует ли проводить вакцинацию против пневмонии у больных с ревматодным артритом?

- P- Больные с ревматодным артритом
- I- Вакцинация против пневмонии
- C- нет
- O-нет

Прикладной вопрос

- Целесообразно ли проводить вакцинацию для предотвращения распространения Streptococcus pneumoniae у больных с ревматоидным артритом и больных не страдающих данным заболеванием?

- P- Пациенты с ревматоидным артритом
- I- Вакцина против пневмонии
- C- Развитие заболевания у больных с ревматиодным артритом и без него
- O- Предотвращение распространения Streptococcus pneumoniae

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Ключевые слова

- Вакцинация против пневмонии
- Vaccination against pneumonia

Поиск по ключевым словам

vaccination against pneu

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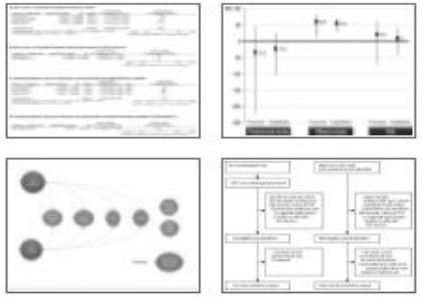

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Поиск по ключевым словам

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Поиск по ключевым словам

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3. Effect of abatacept on the immunogenicity of 23-valent pneumococcal polysaccharide **vaccination** (PPSV23) in rheumatoid arthritis patients.
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Arthritis Res Ther. 2017 Jan 25;19(1):15. doi: 10.1186/s13075-016-1207-7.

The 23-valent pneumococcal polysaccharide vaccine in patients with rheumatoid arthritis: a double-blinded, randomized, placebo-controlled trial.

Izumi Y[1], Akazawa M[2], Akeda Y[3], Tohma S[1], Hirano F[1], Ideguchi H[1], Matsumura R[1], Miyamura T[1], Mori S[1], Fukui T[1], Iwanaga N[1], Jiuchi Y[1], Kozuru H[1], Tsutani H[1], Saisyo K[1], Sugiyama T[1], Suenaga Y[1], Okada Y[1], Katayama M[1], Ichikawa K[1], Furukawa H[1], Kawakami K[1], Oishi K[4], Migita K[5,6].

Author information

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Abstract

BACKGROUND: Pneumococcal pneumonia is the most frequent form of pneumonia. We herein assessed the effectiveness of the 23-valent pneumococcal polysaccharide vaccine (PPSV23) in the prevention of pneumonia overall in rheumatoid arthritis (RA) patients at risk for infections. We hypothesized that PPSV23 vaccination is superior in preventing pneumococcal pneumonia compared with placebo in RA patients.

METHODS: A prospective, multicenter, double-blinded, randomized, placebo-controlled (1:1) trial was conducted across departments of rheumatology in Japanese National Hospital Organization hospitals. RA patients (n = 900) who had been treated with biological or immunosuppressive agents were randomly assigned PPSV23 or placebo (sodium chloride). The primary endpoints were the incidences of all-cause pneumonia and pneumococcal pneumonia. The secondary endpoint was death from pneumococcal pneumonia, all-cause pneumonia, or other causes. Cox regression models were used to estimate the risk of pneumonia overall for the placebo group compared with the vaccine group.

RESULTS: Seventeen (3.7%) of 464 patients in the vaccine group and 15 (3.4%) of 436 patients in the placebo group developed pneumonia. There was no difference in the rates of pneumonia between the two study groups. The overall rate of pneumonia was 21.8 per 1000 person-years for patients with RA. The presence of interstitial pneumonia (hazard ratio: 3.601, 95% confidence interval: 1.547-8.380) was associated with an increased risk of pneumonia in RA patients.

CONCLUSION: PPSV23 does not prevent against pneumonia overall in RA patients at relative risk for infections. Our results also confirm that the presence of interstitial lung disease is associated with pneumonia in Japanese patients with RA.

TRIAL REGISTRATION: UMIN-CTR UMIN000009566 . Registered 17 December 2012.

KEYWORDS: Interstitial lung disease; Pneumococcal polysaccharide vaccine; Pneumonia; Rheumatoid arthritis

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Название статьи/ **Name of article**

- **23-валентная пневмококковая полисахаридная вакцина у пациентов с ревматоидным артритом.**
- **The 23-valent pneumococcal polysaccharide vaccine in patients with rheumatoid arthritis**

Тип медицинского исследования

Это рандомизированное контролируемое исследование. Так как:

- Проводилась рандомизация групп пациентов
- Есть контрольная группа(плацебо) и группа активного лечения

Сведения о местоположении и авторах:

- Место проведения исследования: Across departments of rheumatology in Japanese National Hospital Organization hospitals.
(Перекрестные отделы ревматологии в Японской национальной больнице)

- Авторы: Izumi Y[1], Akazawa M[2], Akeda Y[3], Tohma S[1], Hirano F[1], Ideguchi H[1], Matsumura R[1], Miyamura T[1], Mori S[1], Fukui T[1], Iwanaga N[1], Jiuchi Y[1], Kozuru H[1], Tsutani H[1], Saisyo K[1], Sugiyama T[1], Suenaga Y[1], Okada Y[1], Katayama M[1], Ichikawa K[1], Furukawa H[1], Kawakami K[1], Oishi K[4], Migita K[5,6].

- Дата публикации: 2017 Jan 25

- **METHODS:**
- A prospective, multicenter, double-blinded, randomized, placebo-controlled (1:1) trial was conducted across departments of rheumatology in Japanese National Hospital Organization hospitals. RA patients (n = 900) who had been treated with biological or immunosuppressive agents were randomly assigned PPSV23 or placebo (sodium chloride). The primary endpoints were the incidences of all-cause pneumonia and pneumococcal pneumonia. The secondary endpoint was death from pneumococcal pneumonia, all-cause pneumonia, or other causes. Cox regression models were used to estimate the risk of pneumonia overall for the placebo group compared with the vaccine group.
- **МЕТОДЫ:**
- Проспективное, многоцентровое, двойное слепое, рандомизированное, плацебо-контролируемое (1:1) исследование проводилось через отделения ревматологии в Японской национальной больнице. Пациенты с равматоидным артритом (n = 900), которые получали биологические или иммунодепрессанты, случайным образом назначали PPSV23 или плацебо (хлорид натрия). Первичными конечными точками были случаи пневмонии других причин и пневмококковой пневмонии. Вторичной конечной точкой была смерть от пневмококковой пневмонии, и от пневмонии в остальных случаях или по другим причинам. Для оценки риска развития пневмонии в группе плацебо, по сравнению с группой вакцин использовались Модели регрессии Кокса.

- **RESULTS:**
- Seventeen (3.7%) of 464 patients in the vaccine group and 15 (3.4%) of 436 patients in the placebo group developed pneumonia. There was no difference in the rates of pneumonia between the two study groups. The overall rate of pneumonia was 21.8 per 1000 person-years for patients with RA. The presence of interstitial pneumonia (hazard ratio: 3.601, 95% confidence interval: 1.547-8.380) was associated with an increased risk of pneumonia in RA patients.

- **РЕЗУЛЬТАТЫ:**
- Пневмония развилась у 17 или(3,7%) из 464 пациентов в группе вакцины, и у 15 или(3,4%) из 436 пациентов в группе плацебо. Не было никакой разницы в темпах развития пневмонии между двумя исследовательскими группами. Общая частота пневмонии составила 21,8 на 1000 человек для пациентов с ревматоидным артритом. Наличие интерстициальной пневмонии (отношение рисков: 3,601, доверительный интервал 95%: 1,547-8,380) было связано с повышенным риском пневмонии у пациентов с ревматоидным артритом.

- ***CONCLUSION:***
- PPSV23 does not prevent against pneumonia overall in RA patients at relative risk for infections. Our results also confirm that the presence of interstitial lung disease is associated with pneumonia in Japanese patients with RA.

- ***ВЫВОД:***
- PPSV23 не предотвращает появление пневмонии у пациентов с РА при относительном риске заражения. Наши результаты также подтверждают, что наличие интерстициального заболевания легких связано с пневмонией у японских пациентов с РА.

Мое мнение:

- Таким образом мы выяснили, что **23-валентная пневмококковая полисахаридная вакцина** нецелесообразна для профилактики развития пневмонии у пациентов с ревматоидным артритом.

Благодарю за внимание!