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سرویس های ویژه



سرویس ترجمه تخصصی



کارگاه های آموزشی



بلاگ مرکز اطلاعات علمی



عضویت در خبرنامه



فیلم های آموزشی

کارگاه های آموزشی مرکز اطلاعات علمی جهاد دانشگاهی



مباحث پیشرفته یادگیری عمیق؛
شبکه های توجه گرافی
(Graph Attention Networks)



کارگاه آنلاین آموزش استفاده از
وب آو ساینس



کارگاه آنلاین مقاله روزمره انگلیسی

(Ph D)

(Ph D)

(MD)

(MD)

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(MD)

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// :

// :

mg

hs-CRP ESR FEF25-75% FEV1/FVC FVC FEV1
 P-value <0.05 Mann-Whitney t-test, χ^2
 hs-CRP ESR
 FEF25-75%, FEV1, FEV1/FVC
 (P<0.001)
 (P<0.001)

// / :

(.)

(.)

methylglutaryl 1-coenzyme A)

HMG-COA(3-hydroxy-3-

(.)

()

(.)

()

LFA-I/ICAM-I

(.)

IL-8

(.)

(.)

()

random block

(.)

()

(CXCL)10

γ

IL5 IL4

outcome

(CCL)17

Mann- t-test, χ^2

(TH1, TH2)T

P-value < 0.05

Whitney

()
()

(LD, HD, minipill)]
[

(GINA)

< () (<)

FEV1

(hs-CRP, ESR

() () -
()

) () OCP

(%) hs-CRP (%)
 hs-CRP
 .(P-value=0.39)
 (ACT)

)
 ()
 Feridmann
 () ACT / (SD= /)
 (SD= /)
 (P- value<0.001)

Repeated measure ANOVA Kolmogrov-
 FVC Smirnov
 hs-CRP,ESR,FEF25-75%
 T-test

(CI=)		$\bar{x}(\pm SD)$	$\bar{x}(\pm SD)$	
- / (- / _ /)	P= / *	/ \pm /	/ \pm	FEV1
- / (- / _ /)	P= /	/ \pm /	/ \pm /	FVC
- / (- / _ /)	P= /	/ \pm /	/ \pm /	FEV1/FVC

T-test *

...

:

(CI=)		$\bar{x}(\pm SD)$	$\bar{x}(\pm SD)$	
/ (- / _ /)	*P= /	/ ± /	/ ± /	FEF25-75%
- / (- / _ /)	P= /	- / ± /	/ ± /	HsCRP
- / (- / _ /)	P= /	- / ± /	- / ± /	ESR

Mann Whitney *

hs-CRP

Ridker

mg ()

CRP

()

(mg)

FEV1 PEF

Menzies

()

) CRP

(

()

()

mg

mg

ESR CRP

()

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Effect of Atorvastatin on Indices of Chronic Asthma in Patients under Treatment with High Dose Inhaled Steroid or Oral Steroid

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Abstract

Introduction: Statins are the most common type of cholesterol- lowering drugs which have anti-inflammatory properties that may be beneficial in the treatment of inflammatory diseases such as asthma. Regarding to examine new medications for asthma management due to the side effects of existing routine asthma treatments, statins are one of drugs which have been suggested recently.

Objective: Effect of atorvastatin on lung function and airway inflammation.

Materials and Methods: In this triple blind clinical trial study sixty seven patients with moderate to severe asthma were entered. They were divided to two groups randomly. Case group were treatment by oral atorvastatin 40 mg daily and control group were treatment by placebo on lung function.

Patients were visited and their lung volumes (FEV1, FVC, FEV1 /FVC, FEF 25-75%) and inflammatory biomarkers (ESR, Hs-CRP) and asthma control questionnaire score were measured every 4 weeks during the course. Fifty patients completed the study.

Data was analyzed by χ^2 , t-test and Mann-Whitney test. P value <0.05 was significant.

Results: There were no significant differences in lung volumes and inflammatory biomarkers between atorvastatin and placebo groups. We observed significant differences in the trend of lung volumes include FEV1, FEV1/FVC and FEF 25-75 % in each of the atorvastatin and placebo groups during the course of study (p<0.001) but there were no significant differences between them. There were significant differences in the trend of asthma control according to asthma control questionnaires in each of atorvastatin and placebo groups during the course (p <0.001).

Conclusion: According to this study, atorvastatin does not show any significant anti-inflammatory activity in patients with moderate to severe asthma therefore it could not be beneficial for the short term treatment of asthma. But it seems that regular visit and patient education could lead to better asthma control.

Key words: Asthma/ Atorvastatine/ Glucocorticoids

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