Psychogeriatrics. 2023 Oct 23. doi: 10.1111/psyg.13038. Online ahead of print.

# Slowly diagnosed dementia

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# Beyond conventional physical examination in hepatology: POCUS

**Free article**

## Abstract

Point-of-care ultrasound (POCUS) refers to the use of ultrasound imaging through pocket-sized sonographic devices at the patient's bedside, to make a diagnosis or direct a procedure and immediately answer a clinical question. Its goal is to broaden the physical examination, not to replace conventional ultrasound studies. POCUS has evolved as a complement to physical examination and has been adopted by different medical specialties, including hepatology. A narrative synthesis of the evidence on the applications of POCUS in hepatology was carried out, describing its usefulness in the diagnosis of cirrhosis of the liver, metabolic dysfunction-associated steatotic liver disease (MASLD), decompensated cirrhosis, and portal hypertension. The review also encompasses more recent applications in the hemodynamic evaluation of the critically ill patient with cirrhosis of the liver, patients with other liver diseases, as well as in the ultrasound guidance of procedures. POCUS could make up part of the daily clinical practice of gastroenterologists and hepatologists, simplifying the initial evaluation of patients and optimizing clinical management. Its accessibility, ease of use, and low adverse event profile make POCUS a useful tool for the properly trained physician in the adequate clinical setting. The aim of this review was to describe the available evidence on the usefulness of POCUS in the daily clinical practice of gastroenterologists and hepatologists.

**Keywords:**Cirrosis descompensada; Decompensated cirrhosis; Esteatosis; Hipertensión portal; POCUS, Pocket-sized ultrasound; POCUS, ultrasonido de bolsillo; Portal hypertension; Stricture.

Review

# Prone Positioning for Patients With COVID-19-Induced Acute Hypoxemic Respiratory Failure: Flipping the Script

## Abstract

During the COVID-19 pandemic, prone positioning (PP) emerged as a widely used supportive therapy for patients with acute hypoxemic respiratory failure caused by COVID-19 infection. In particular, awake PP (APP)-the placement of non-intubated patients in the prone position-has gained popularity and hence is detailed first herein. This review discusses recent publications on the use of PP for non-intubated and intubated subjects with COVID-19, highlighting the physiological responses, clinical outcomes, influential factors affecting treatment success, and strategies to improve adherence with APP. The use of prolonged PP and the use of PP for patients undergoing extracorporeal membrane oxygenation are also presented.

**Keywords:**COVID-19; acute hypoxemic respiratory failure; awake prone positioning; prone positioning.

Behav Sci (Basel). 2023 Oct 17;13(10):849. doi: 10.3390/bs13100849.

# Association between Maternal and Toddler Appetitive Traits in a Mexican Population

## Abstract

The Child Eating Behaviour Questionnaire for toddlers (CEBQ-T-Mex) and the Adult Eating Behaviour Questionnaire (AEBQ-Esp) measure appetitive traits (ATs) in children and adults, respectively, both validated for use in Spanish. ATs are inherited variations in appetite, present from birth, that are reasonably stable throughout childhood and can explain why some infants over- or undereat in response to environmental exposures. "Food approach" traits predispose to overweight while "food avoidance" traits provide protection, but little is known about the relationships between parents' and their toddler's ATs. The aim was to examine the associations between maternal and toddler appetitive traits, using the AEBQ-Esp and CEBQ-T-Mex, and to examine the associations between ATs and Body Mass Index z-scores (BMIz). Sociodemographic data and the weights and heights of mothers and toddlers (aged 12-36 months) were collected from a teaching hospital in Guadalajara, Mexico. Mothers completed both the AEBQ-Esp and the CEBQ-T-Mex. Direct correlations were found between the ATs of toddlers and their mother (*p* < 0.005), except for "Slowness in Eating" (SE), and only an inverse correlation was found between the "Satiety Responsiveness" (SR) of toddlers and their BMIz (r = -0.147; *p* = 0.007). These results suggest that ATs could potentially run in families. These may be useful targets for family-wide interventions to support the development and maintenance of healthy eating behaviours in childhood.

**Keywords:**BMIz score; appetite; appetitive traits; toddlers.

# Expression of Transcriptional Factors of T Helper Differentiation (T-bet, GATA-3, RORγt, and FOXP3), MIF Receptors (CD44, CD74, CXCR2, 4, 7), and Th1, Th2, and Th17 Cytokines in PBMC from Control Subjects and Rheumatoid Arthritis Patients

## Abstract

**Introduction:**The macrophage migration inhibitory factor (MIF) plays a pivotal role in the development of rheumatoid arthritis (RA). Previous research indicates that MIF can trigger the expression of cytokine profiles associated with Th1, Th2, and Th17 responses in peripheral blood mononuclear cells (PBMC) from both RA patients and control subjects (CS). Despite these, few studies to date precisely elucidate the molecular mechanisms involved. The present study aimed to associate the expression of Th differentiation TF (T-bet, GATA-3, RORγt) with MIF receptors (CD44, CD74, CXCR2, 4, 7) and Th1, Th2, and Th17 cytokines in PBMC from CS and RA patients.

**Method:**PBMC from both groups was cultured for 24 h. The expression of the canonical and non-canonical MIF receptors and the TF was determined by flow cytometry. Additionally, multiplex bead analysis was employed to assess the levels of cytokines in the culture supernatants. The findings revealed that T CD4+ lymphocytes in the CS group exhibited a heightened expression of CD74 (p<0.05), whereas RA patients displayed an elevated expression of CXCR7 (p<0.001). Furthermore, T CD4+ lymphocytes from RA patients exhibited greater expression of GATA3, RORγt, and FOXP3, along with elevated levels of pro-inflammatory cytokines compared to the CS group (p<0.001).

**Result:**These results indicate that CD74 is more prominently expressed in PBMC from the CS group, whereas CXCR7 is more expressed in PBMC from RA patients.

**Conclusion:**We also noted an increased secretion of Th17 profile cytokines in RA, potentially influenced by the activation of FOXP3 via CD74 and RORγt through CXCR7 using the endocytic pathway.

**Keywords:**rheumatoid arthritis; MIF; CD74; CD44; CXCR; transcription factor; cytokines.

# Prospective cohort study of incidence and risk factors for catheter-associated urinary tract infections in 145 intensive care units of 9 Latin American countries: INICC findings

## Abstract

**Purpose:**Identify urinary catheter (UC)-associated urinary tract infections (CAUTI) incidence and risk factors (RF) in Latin American Countries.

**Methods:**From 01/01/2014 to 02/10/2022, we conducted a prospective cohort study in 145 ICUs of 67 hospitals in 35 cities in nine Latin American countries: Argentina, Brazil, Colombia, Costa Rica, Dominican Republic, Ecuador, Mexico, Panama, and Peru. To estimate CAUTI incidence, we used the number of UC-days as the denominator, and the number of CAUTIs as numerator. To estimate CAUTI RFs, we analyzed the following 10 variables using multiple logistic regression: gender, age, length of stay (LOS) before CAUTI acquisition, UC-days before CAUTI acquisition, UC-device utilization (DU) ratio, UC-type, hospitalizationtype, ICU type, facility ownership, and time period.

**Results:**31,631 patients, hospitalized for 214,669 patient-days, acquired 305 CAUTIs. The pooled CAUTI rate per 1000 UC-days was 2.58, for those using suprapubic catheters, it was 2.99, and for those with indwelling catheters, it was 2.21. The following variables were independently associated with CAUTI: age, rising risk 1% yearly (aOR = 1.01; 95% CI 1.01-1.02; p < 0.0001 female gender (aOR = 1.28; 95% CI 1.01-1.61; p = 0.04), LOS before CAUTI acquisition, rising risk 7% daily (aOR = 1.07; 95% CI 1.06-1.08; p < 0.0001, UC/DU ratio (aOR = 1.14; 95% CI 1.08-1.21; p < 0.0001, public facilities (aOR = 2.89; 95% CI 1.75-4.49; p < 0.0001. The periods 2014-2016 and 2017-2019 had significantly higher risks than the period 2020-2022. Suprapubic catheters showed similar risks as indwelling catheters.

**Conclusion:**The following CAUTI RFs are unlikely to change: age, gender, hospitalization type, and facility ownership. Based on these findings, it is suggested to focus on reducing LOS, UC/DU ratio, and implementing evidence-based CAUTI prevention recommendations.

**Keywords:**Catheter-associated urinary tract infections; INICC; Incidence; Intensive care units; Rates; Risk factors.