

# Fuentes de información y búsqueda bibliográfica:

## Anexo A del Programa MADRE versión 4.0 (pág. 96 a 112)

**XI** CURSO DE EVALUACIÓN Y SELECCIÓN DE MEDICAMENTOS

Servicios de Farmacia | Hospitales Virgen del Rocío y Son Espases

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## ANEXO A

Fuentes de información y búsqueda bibliográfica

**1- BÚSQUEDA DE DATOS ESTADÍSTICOS SOBRE SALUD**

**2- BÚSQUEDA DE GUÍAS DE PRÁCTICA CLÍNICA**

**3- BÚSQUEDA DE ENSAYOS CLÍNICOS**

**4- BÚSQUEDA DE REFERENCIAS DE REVISIONES Y METAANÁLISIS**

**5- BÚSQUEDA DE ESTUDIOS NO PUBLICADOS**

**6- BÚSQUEDA DE REFERENCIAS DE COMPARACIONES INDIRECTAS**

**7- BÚSQUEDA DE EVALUACIONES PREVIAS DEL MEDICAMENTO REALIZADAS POR ORGANISMOS INDEPENDIENTES**

**8- OPINIONES DE EXPERTOS**

**9- BÚSQUEDA DE REFERENCIAS DE ESTUDIOS OBSERVACIONALES**

**10- BÚSQUEDA DE INFORMACION SOBRE SEGURIDAD**

**11- BÚSQUEDA DE REFERENCIAS DE ESTUDIOS DE EVALUACIÓN ECONÓMICA**

# XI CURSO DE EVALUACIÓN Y SELECCIÓN DE MEDICAMENTOS

Servicios de Farmacia | Hospitales Virgen del Rocío y Son Espases



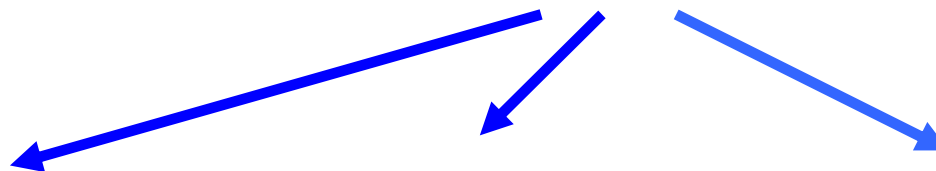
1. La ficha técnica y la discusión científica.
2. Evaluaciones realizadas por organismos independientes.
3. Metabuscadores
4. Ensayos clínicos publicados (fuentes primarias): el ensayo pivotal.
5. Base de datos de Ensayos Clínicos: [Clinicaltrials.gov](http://Clinicaltrials.gov).
6. Guías de práctica clínica: Guía Salud, Fisterra, National Guideline Clearinghouse, NCCN.
7. Literatura gris e Internet invisible: Metabuscador Scirus.



# 1. La ficha técnica y la discusión científica.



Ensayos toxicidad, farmacocinéticos, ensayos fase III, pivotaes, etc



## Drug information:

- Patient Package Insert
- Label (1 ó varias)
- Review (1 ó varias)

## European Public Assessment Report (EPAR):

- 
- EPAR - Product information (sólo 1)
- EPAR - Scientific Discussion (1 ó varias)

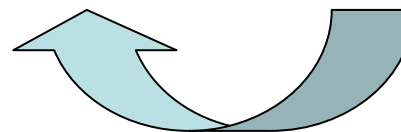
## Centro de Información de medicamentos:

- Prospecto
- Ficha técnica (sólo 1)
- En algunos casos redirige a EMA.



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La AEMPSMedicamentos de uso humanoMedicamentos veterinariosProductos sanitarios

▶ Portada

CIMA: Centro de Información Online de Medicamentos de la AEMPS 

Observatorio de uso de medicamentos

Medicamentos no sustituibles

Farmacovigilancia

Investigación clínica con medicamentos

Notas informativas

Notas de seguridad

Inicio ▶ Medicamentos de uso humano

▶ Portada

CIMA: Centro de Información Online de Medicamentos de la AEMPS

▶ Centro de Información online de Medicamentos de la AEMPS - CIMA

**Criterios de búsqueda (puede rellenar uno o más criterios)**

Medicamento <input type="text" value="AVASTIN"/>	Laboratorio titular <input type="text"/>	
Principio Activo 1 <input type="text"/>	Principio Activo 2 <input type="text"/>	Nº P. Activ.: <input type="text"/>
Código Nacional <input type="text"/>	Número de Registro <input type="text"/>	Código ATC <input type="text"/>
Medicamentos NO sustituibles por el farmacéutico <input type="text"/>		

Número de Registro	Medicamento	Principios Activos	Laboratorio titular	Estado del medicamento	Condiciones de Prescripción y Uso	Estado comercialización	Información del Medicamento
04300001	AVASTIN 25 mg/ml CONCENTRADO PARA SOLUCION PARA PERFUSION - N.R.: 04300001	Bevacizumab	Roche Registracion Limited	Autorizado 08/02/2005	Uso Hospitalario	Comercializado	FT P

### 1. NOMBRE DEL MEDICAMENTO

Avastin 25 mg/ml concentrado para solución para perfusión.

### 2. COMPOSICIÓN CUALITATIVA Y CUANTITATIVA

Cada ml de concentrado contiene 25 mg de bevacizumab.¶

Cada vial de 4 ml contiene 100 mg de bevacizumab, correspondiente a 1,4 mg/ml cuando se diluye según se recomienda.

Cada vial de 16 ml contiene 400 mg de bevacizumab, correspondiente a 16,5 mg/ml cuando se diluye según se recomienda.

¶ Bevacizumab es un anticuerpo monoclonal humanizado producido por tecnología del ADN recombinante en células ováricas de hámster chino.

Para consultar la lista completa de excipientes, ver sección 6.1.

### 3. FORMA FARMACÉUTICA

Concentrado para solución para perfusión.

Líquido de incoloro a marrón pálido y de transparente a ligeramente opalescente.

### 4. DATOS CLÍNICOS

#### 4.1 Indicaciones terapéuticas

Bevacizumab está indicado en combinación con quimioterapia basada en fluoropirimidinas para el tratamiento de pacientes adultos con carcinoma metastásico de colon o recto.

Bevacizumab está indicado en combinación con paclitaxel para el tratamiento en primera línea de pacientes adultos con cáncer de mama metastásico. Para más información sobre el estado del receptor 2 del factor de crecimiento epidérmico humano (HER2), ver sección 5.1.



### Centralised authorisation procedure

The centralised procedure is compulsory for:

- ▶ human medicines for the treatment of HIV/AIDS, cancer, diabetes, neurodegenerative diseases, auto-immune and other immune dysfunctions, and viral diseases;
- ▶ veterinary medicines for use as growth or yield enhancers;
- ▶ medicines derived from biotechnology processes, such as genetic engineering;
- ▶ advanced-therapy medicines, such as gene-therapy, somatic cell-therapy or tissue-engineered medicines;
- ▶ officially designated 'orphan medicines' (medicines used for rare human diseases).

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Include:  
 Authorised medicine  
 Withdrawn post-approval  
 Suspended  
 Refused



# Avastin

bevacizumab

About

Authorisation details

Product information

Assessment history

Next tab »

This is a summary of the **European public assessment report (EPAR)** for Avastin. It explains how the Committee for Medicinal Products for Human Use (CHMP) assessed the medicine to reach its opinion in favour of granting a marketing authorisation and its recommendations on the conditions of use for Avastin.

## Changes since initial authorisation of medicine

Name	Language	First published
Avastin : EPAR - Procedural steps taken and scientific information after authorisation	(English only)	17/09/2009
CHMP post-authorisation summary of positive opinion for Avastin	(English only)	21/09/2012
CHMP post-authorisation summary of positive opinion for Avastin	(English only)	23/09/2011
CHMP post-authorisation summary of positive opinion for Avastin	(English only)	15/04/2011
Questions and answers on the recommendation for the refusal of a change to the marketing authorisation for Avastin	EN = English	19/11/2009
CHMP post-authorisation summary of positive opinion for Avastin	(English only)	18/02/2009

## Product information

21/02/2013 Avastin - EMEA/H/C/000582 -II/0057

Name	Language	First published	Last updated
Avastin : EPAR - Product Information	EN = English	17/09/2009	25/03/2013

Ficha técnica única, actualizada, en varios idiomas.

## Initial marketing-authorisation documents

Name	Language	First published
Avastin : EPAR - Scientific Discussion	(English only)	24/01/2006
Avastin : EPAR - Procedural steps taken before authorisation	(English only)	24/01/2006

Nuevas evaluaciones, ampliación de indicaciones, etc.



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## EPAR- Scientific Discussion:

### **Part I: Introducción:**

**La patología, incidencia, tratamientos actuales, etc.**

### **Part II: Chemical, pharmaceutical and biological aspects:**

**Composición, estabilidad, fabricación, etc.**

### **Part III: Toxicopharmacological aspects:**

**Farmacología, farmacocinética, farmacodinamia (ADME), estudios toxicológicos.**

### **Part IV: Clinical aspects:**

**Estudios farmacocinéticos (fase I).**

**Estudios de eficacia clínica (fase II ó III): respuesta, supervivencia, calidad de vida.**

**Estudios de seguridad: eventos adversos, resultados de laboratorio, poblaciones especiales (ancianos, pediátricos, insuficiencia renal, insuficiencia hepática).**

**Overall conclusions and benefit/risk assessment**

**Recommendation**

**References**



# U.S. Food and Drug Administration

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## XI CURSO DE EVALUACIÓN Y SELECCIÓN DE MEDICAMENTOS

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## Drug Details

Drug Name(s)	AVASTIN
FDA Application No.	(BLA) 125085
Active Ingredient(s)	BEVACIZUMAB
Company	GENENTECH
Original Approval or Tentative Approval Date	February 26, 2004

- [There are no Therapeutic Equivalents](#)
- [Approval History, Letters, Reviews, and Related Documents](#)
- [Label Information](#)
- [Other Important Information from FDA](#)



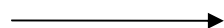
Orden cronológico

Action Date	Supplement Number	Approval Type	Letters, Reviews, Labels, Patient Package Insert	Note
01/23/2013	263	New or Modified Indication	Label (PDF) Letter (PDF)	
11/20/2012	265	Labeling Revision	Label (PDF) Letter (PDF)	
10/26/2012	239	Efficacy Supplement with Clinical Data to Support	Label (PDF) Letter (PDF)	
05/03/2012	0238	Supplement	Label (PDF) Letter (PDF)	
12/20/2011	0241	Supplement	Letter (PDF)	Label is not available on this site.
09/30/2011	225	Supplement	Label (PDF) Letter (PDF)	
02/08/2011	208	Supplement	Letter (PDF)	Label is not available on this site.
12/28/2010	204	Supplement	Letter (PDF)	Label is not available on this site.
07/31/2009	0168	Supplement	Label (PDF) Letter (PDF)	
05/05/2009	0169	Supplement	Label (PDF) Letter (PDF)	
03/10/2008	0145	Supplement	Label (PDF) Letter (PDF)	
02/22/2008	0091	Supplement	Letter (PDF) Review (PDF)	Label is not available on this site.
09/20/2007	0131	Supplement	Label (PDF)	
10/11/2006	0085	Supplement	Label (PDF) Letter (PDF) Review (PDF)	
09/21/2006	0082	Supplement	Label (PDF) Letter (PDF)	
06/20/2006	0074	Supplement	Label (PDF) Letter (PDF) Review (PDF)	
04/18/2006	0067	Supplement	Label (PDF) Letter (PDF)	
09/30/2005	0045	Supplement	Label (PDF) Letter (PDF)	
02/26/2004	000	Approval	Label (PDF) Letter (PDF) Review	

**XI** CURSO DE EVALUACIÓN Y SELECCIÓN DE

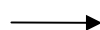
Servicios de Farmacia | Hospitales Virgilio

2012



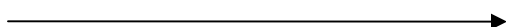
RECENT MAJOR CHANGES	
Indications and Usage, <b>Metastatic Breast Cancer</b> (1.3) – <b>Removed</b>	12/2011
Dosage and Administration. Recommended Doses and	12/2011

2008 a 2011



- **Metastatic breast cancer**, with paclitaxel for treatment of patients who have not received chemotherapy for metastatic HER2-negative breast cancer. (1.3)  
-Effectiveness based on improvement in progression-free survival. No data available demonstrating improvement in disease-related symptoms or survival with Avastin.

2004

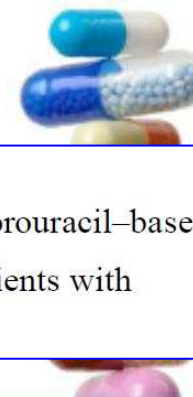


#### INDICATIONS AND USAGE

AVASTIN, used in combination with intravenous 5-fluorouracil-based chemotherapy, is indicated for first-line treatment of patients with metastatic carcinoma of the **colon or rectum**.

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**MADRE:**

**ABIRATERONA**  
**En cáncer de próstata metastásico**  
(Informe para la Comisión de Farmacia y Terapéutica del Hospital Universitario de Getafe)  
Fecha 18/01/12

**4.2 Indicaciones clínicas formalmente aprobadas y fecha de aprobación**

AEMyPS (08/09/11) y EMA (05/09/11): indicado con prednisona o prednisolona para el tratamiento del cáncer de próstata metastásico resistente a la castración en hombres adultos cuya enfermedad ha progresado durante o tras un régimen de quimioterapia basado en docetaxel.

FDA (28/04/11): en combinación con prednisona para el tratamiento de pacientes con cáncer de próstata resistentes a la castración que han recibido una línea previa de tratamiento con docetaxel.

**3.- AREA DESCRIPTIVA DEL MEDICAMENTO Y DEL PROBLEMA DE SALUD**

**3.1 Área descriptiva del medicamento**

Nombre genérico:  
Nombre comercial:  
Laboratorio:  
Grupo terapéutico. Denominación: Código ATC:  
Vía de administración:  
Tipo de dispensación:

**4.2 Indicaciones clínicas formalmente aprobadas y fecha de aprobación.**

AEMPS:	[Fecha de aprobación]
EMA:	[Fecha de aprobación]
FDA:	[Fecha de aprobación]



## 3.2 Área descriptiva del problema de salud

3.2.b Tratamiento actual de la enfermedad: evidencias

3.3 Características comparadas con otras alternativas similares

## 4.- AREA DE ACCIÓN FARMACOLÓGICA.

4.1 Mecanismo de acción.

4.3 Posología, forma de preparación y administración.

4.4 Utilización en poblaciones especiales.

4.5 Farmacocinética.

## 5.- EVALUACIÓN DE LA EFICACIA.

5.1.a Ensayos clínicos disponibles para la indicación clínica evaluada

5.1.b Variables utilizadas en los ensayos

5.2.a Resultados de los ensayos clínicos

*Tabla 1. Modelo general de tabla de resultados de eficacia:*

## 6. EVALUACIÓN DE LA SEGURIDAD.

SELECCIÓN DE MEDICAMENTOS

Se 6.1.b Descripción de los efectos adversos más significativos

## 2. Evaluaciones realizadas por organismos independientes:

<http://www.nice.org.uk/>

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Health and Clinical Excellence

**NICE** National Institute for  
Health and Care Excellence

**NHS**  
National Health Service

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To ensure our judgements are fair, we use a standard and internationally recognised method to compare different drugs and measure their clinical effectiveness: the quality-adjusted life years measurement (the 'QALY').

Cost effectiveness is expressed as '£ per QALY'.

Each drug is considered on a case-by-case basis. Generally, however, if a treatment costs more than £20,000-30,000 per QALY, then it would not be considered cost effective.

**XI** CURSO DE EVALUACIÓN Y  
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## 1 Guidance

### 1.1 Bevacizumab in combination with a taxane is not recommended for the first-line treatment of metastatic breast cancer.

Abiraterone in combination with prednisone or prednisolone is recommended as an option for the treatment of castration-resistant metastatic prostate cancer in adults, only if:

- their disease has progressed on or after one docetaxel-containing chemotherapy regimen, and
- the manufacturer provides abiraterone with the discount agreed in the patient access scheme.

Omalizumab is recommended as an option for treating severe persistent confirmed allergic IgE-mediated asthma as an add-on to optimised standard therapy in people aged 6 years and older:

- who need continuous or frequent treatment with oral corticosteroids (defined as 4 or more courses in the previous year), and
- only if the manufacturer makes omalizumab available with the discount agreed in the patient access scheme.



**GENESIS**

Informes hospitalares, última modificación 4 de abril de 2013:

» Acceso a más de 1000 informes: [Enlace](#)

Informes centros de documentación, última modificación 2 de abril de 2013:

» Acceso a más de 900 informes: [Enlace](#)

**PROGRAMA MADRE 2012, 1 de octubre de 2012:**

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**A B C D E F G H I J K L M N O P Q R S T U V W X Y Z**

Principio Activo	Indicación	Autor	Tipo informe	Fecha Informe	Fecha Publicación	Enlace
<b>A</b>						
<b>Abacavir + Lamivudina</b>	VIH	H.C.U. de Valladolid		14/02/08	04/08	word
<b>Abatacept</b>	Artritis Reumatoide	GFT de Hospitales de Andalucía	Definitivo	26/06/2008	09/08	PDF
		H.U. de la Vall d´Hebrón			10/08	PDF
		H.U. Móstoles			06/09	PDF
		H.U. Reina Sofía			09/08	PDF
		H.U. Virgen del Rocío	Adaptado	01/09/08	10/08	word
		H.U. Virgen de la Arrixaca	Original	01/10/08	10/08	PDF
<b>Abciximab</b>	Síndrome coronario agudo en ICP	H. Cabueñes (Asturias)	Original	09/06/11	11/11	PDF
<b>Abiraterona-Cabazitaxel</b>	Cáncer de próstata metastásico	H.U. Virgen de la Arrixaca	Original	01/2013	02/13	PDF
		H.U. Virgen del Rocío	Original	07/03/12	03/12	word
<b>Abiraterona</b>	Cáncer de próstata metastásico	H.C.U. de Valladolid	Actualizado	30/10/12	11/12	PDF
		H.U.P. La Fe	Original	02/2012	03/12	PDF
		H. U. Getafe	Original	18/01/12	02/12	word



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- Treatment protocols for non-small cell lung cancer
- Toxicity of molecularly targeted antiangiogenic agents: Non-cardiovascular effects
- Treatment protocols for colorectal cancer
- Toxicity of molecularly targeted antiangiogenic agents: Cardiovascular effects
- Metastatic gastroenteropancreatic neuroendocrine tumors: Systemic therapy options to control tumor growth and symptoms of hormone hypersecretion
- Medical treatment for relapsed epithelial ovarian, fallopian tubal, or peritoneal cancer: Platinum-sensitive disease
- Treatment protocols for gynecologic malignancies
- Bronchial carcinoid tumors: Treatment and prognosis
- Management of recurrent malignant gliomas
- Age-related macular degeneration: Treatment and prevention

**XI**

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- Regulatory Status
- Generic Availability
- Mechanism of Action/Pharmacokinetics
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- How Supplied
- Toxicology - Clinical Effects
- Toxicology - Treatment
- Toxicology - Range of Toxicity
- Clinical Teaching
- References

## XI CURSO DE EVALUACIÓN Y SELECCIÓN DE MEDICAMENTOS

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+ Title, Abstract, Keywords

[Anti-angiogenic therapies for metastatic colorectal cancer](#)

Anna Dorothea ADW Wagner , Dirk Arnold , Axel AG Grothey , Johannes Haerting and Susanne Unverzagt

July 2009

[Review](#)

[Vascular-endothelial-growth-factor \(VEGF\) targeting therapies for endocrine refractory or resistant metastatic breast cancer](#)

Anna Dorothea Wagner , Christoph Thomssen , Johannes Haerting and Susanne Unverzagt

July 2012

[Review](#)

[Angiogenesis inhibitors for the treatment of ovarian cancer](#)

Kezia Gaitskell , Igor Martinek , Andrew Bryant , Sean Kehoe , Shibani Nicum and Jo Morrison

September 2011

[Review](#)

[Targeted therapy for advanced renal cell carcinoma](#)

Chris Coppin , Lylly Le , Timothy J Wilt and Christian Kollmannsberger

December 2011

[No](#)

[Review](#)

[Anti-vascular endothelial growth factor for prevention of postoperative vitreous cavity haemorrhage after vitrectomy for proliferative diabetic retinopathy](#)

Jonathan M Smith and David HW Steel

May 2011

[Review](#)

[Antiangiogenic therapy with anti-vascular endothelial growth factor modalities for diabetic macular oedema](#)

Gianni Virgili , Mariacristina Parravano , Francesca Menchini and Massimo Brunetti

December 2012





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Resultados de esta búsqueda: BEVACIZUMAB

Mostrar: [Resultados en español \[ 22 resultados \]](#) | [Resultados en inglés \[ 428 resultados \]](#) | en total 450



## TRATAMIENTO ANGIOGÉNICO PARA EL CÁNCER COLORRECTAL METASTÁSICO

**Anna Dorothea ADW Wagner, Dirk Arnold, Axel AG Grothey, Johannes Haerting, Susanne Unverzagt**

Esta revisión debería citarse como: Anna Dorothea ADW Wagner, Dirk Arnold, Axel AG Grothey, Johannes Haerting, Susanne Unverzagt. Tratamiento angiogénico para el cáncer colorrectal metastásico (Revision Cochrane traducida). En: *Biblioteca Cochrane Plus* 2009 Número 3. Oxford: Update Software Ltd. Disponible en: <http://www.update-software.com>. (Traducida de *The Cochrane Library*, 2009 Issue 3 Art no. CD005392. Chichester, UK: John Wiley & Sons, Ltd.)

### RESUMEN

#### Antecedentes

Los inhibidores de la angiogénesis se han desarrollado para bloquear la angiogénesis tumoral, y tienen como blanco las células endoteliales vasculares. Aunque algunos inhibidores de la angiogénesis ya han sido aprobados por las autoridades sanitarias y se han integrado con éxito en la asistencia al paciente, muchos otros están todavía en desarrollo y hay que establecer el valor clínico de este enfoque.

#### Objetivos

Evaluar la eficacia y la toxicidad de los tratamientos antiangiogénicos dirigidos específicamente, añadidos a la quimioterapia, en los pacientes con cáncer colorrectal metastásico. Las variables de evaluación principal primarias son la supervivencia libre de progresión y la supervivencia general. Las tasas de respuesta, la toxicidad y la resecabilidad secundaria fueron las variables de evaluación principal secundarias. Las comparaciones fueron la quimioterapia de primera línea en combinación con los inhibidores de la angiogénesis, con la misma quimioterapia sin inhibidores de la angiogénesis; y la quimioterapia de segunda línea, con la misma quimioterapia sin inhibidor de la angiogénesis.

#### Estrategia de búsqueda

Se hicieron búsquedas en el Registro Cochrane Central de Ensayos Controlados (Cochrane Central Register of Controlled Trials,

Evaluaciones realizadas por organismos independientes (NICE, Genesis, UptoDate, Micromedex) y las revisiones sistemáticas de la Cochrane: son útiles para completar el programa MADRE

5.3.a Revisiones sistemáticas publicadas

5.4.2 Evaluaciones previas por organismos independientes

A nivel nacional  
Otros países

**XI** CURSO DE EVALUACIÓN Y  
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**Buscar** | Resultados de la MetaBúsqueda | Búsquedas recientes

### MetaBúsqueda

Selecciónar tipo de búsqueda:

Grupos de recursos

Bases de Datos sobre Salud

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- Catálogos
- Ciencias de la Documentación
- Ciudadanía
- En Español
- Enciclopedias y Obras de Referencia
- Enfermería
- Farmacología
- Investigación
- Legislación
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- Medicina Basada en la Evidencia

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Resultados combinados por "bevacizumab breast" ( 1097 resultados)

Visualizar resultados por recursos-e

Formato tabla Formato breve Formato completo

Ordenar por: Relevancia

1- 30 de 56 registros (combinar más)

<< <Anterior **Siguiente** >>

No.	Relev.	Autor	Título	Año	Recurso-e	Acción
1	—	Koutras AK	<u>Angiogenesis as a therapeutic target in breast cancer.</u>	2012	MEDLINE	📄🔍
Item duplicado						
2	—	Miles DW	<u>Bevacizumab in breast cancer: fundamental questions remain.</u>	2013	MEDLINE PubMed	📄🔍📄
3	—	Allegra CJ	<u>Bevacizumab in stage II-III colon cancer: 5-year update of the National Surgical Adjuvant Breast and Bowel Project C-08 trial.</u>	2013	MEDLINE	📄🔍📄
4	—	Lang I	<u>Bevacizumab plus paclitaxel versus bevacizumab plus capecitabine as first-line treatment for HER2-negative metastatic breast cancer: interim efficacy results of the randomised, open-label, non-inferiority, phase 3 TURANDOT trial.</u>	2013	MEDLINE	📄🔍📄
5	—	Lindholm EM	<u>Effect of antiangiogenic therapy on tumor growth, vasculature and kinase activity in basal- and luminal-like breast cancer xenografts.</u>	2012	MEDLINE	📄🔍📄
6	—	Jones DT	<u>Gene expression analysis in human breast cancer associated blood vessels.</u>	2012	MEDLINE	📄🔍📄
7	—	Preusser M	<u>Influence of the American ODAC statement on Austrian bevacizumab prescribing practice for metastatic breast cancer.</u>	2012	MEDLINE	📄🔍📄
8	—	De Luca A	<u>Mesenchymal stem cell-derived interleukin-6 and vascular endothelial growth factor promote breast cancer cell migration.</u>	2012	MEDLINE	📄🔍
9	—	Borson R	<u>Phase II study of gemcitabine and bevacizumab as first-line treatment in taxane-pretreated, HER2-negative, locally recurrent or metastatic breast cancer.</u>	2012	MEDLINE	📄🔍📄
10	—	Lang I	<u>Safety results from a phase III study (TURANDOT trial by CECOG) of first-line bevacizumab in combination with capecitabine or paclitaxel for HER-2-negative locally recurrent or metastatic breast cancer.</u>	2012	MEDLINE	📄🔍📄
11	—	Criscitello C	<u>Targeted therapies in breast cancer: are heart and vessels also being targeted?.</u>	2012	MEDLINE	📄🔍📄
12	—	Reddy S	<u>Targeting angiogenesis in metastatic breast cancer.</u>	2012	MEDLINE	📄🔍📄
13	—	Volk-Draper LD	<u>Novel model for basaloid triple-negative breast cancer: behavior in vivo and response to therapy.</u>	2012	MEDLINE	📄🔍
14	—	Sorace AG	<u>Molecular ultrasound imaging using a targeted contrast agent for assessing early tumor response to antiangiogenic therapy.</u>	2012	MEDLINE	📄🔍

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Journal of Bone and Joint Surgery; American Volume  
Chest  
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Gastroenterology  
Circulation  
Gastroenterología y Hepatología  
Diabetes Care  
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Obstetrics and Gynecology  
Neurology  
Journal of the American College of Cardiology  
Annals of Internal Medicine  
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Anales de Pediatría  
Plastic and Reconstructive Surgery  
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The Journal of Clinical Endocrinology and Metabolism

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Eur J Pharmacol. 2013 Mar 29. pii: S0014-2999(13)00250-1. doi: 10.1016/j.ejphar.2013.03.035. [Epub ahead of print]

**Novel strategies towards the use of anti-angiogenic agents in breast cancer.**

Bakker JL, Meijers-Heijboer H, Verheul H.  
Department of Medical Oncology, VU University Medical Center, Amsterdam, The Netherlands; Department of Clinical Genetics, Section Oncogenetics, VU University Medical

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Effect of Clonidine on the Rate and Functional Severity of Stroke Among High-Vascular-Risk Patients  
A Prospective Study of the Clonidine for High-Stroke-Risk Patients  
Background: Clonidine is a centrally acting alpha-2 adrenergic agonist that has been shown to reduce the risk of stroke in patients with hypertension. However, the effect of clonidine on the rate and functional severity of stroke among high-vascular-risk patients remains unclear. We conducted a prospective study to evaluate the effect of clonidine on the rate and functional severity of stroke among high-vascular-risk patients.



## 4 Ensayos clínicos publicados (fuentes primarias): el ensayo pivotal.



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- Texto libre.
- Uso de los términos booleanos.
- Pregunta PICO.
- Términos MeSH.
- Uso de corchetes [TI] y [AU] en el texto libre.
- Clinical Queries.

**XI** CURSO DE EVALUACIÓN Y SELECCIÓN DE MEDICAMENTOS

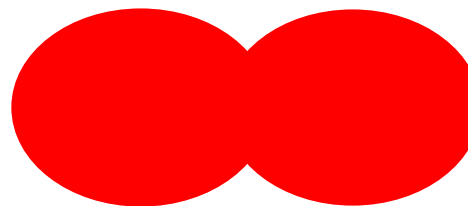
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# Términos booleanos: AND, OR, NOT

**OR:** “bevacizumab” OR “breast”

Artículos que incluyan “bevacizumab” o “breast” o ambos.

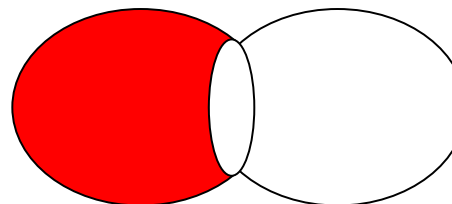


Nº de referencias:

334201

**NOT:** “bevacizumab” NOT “breast”

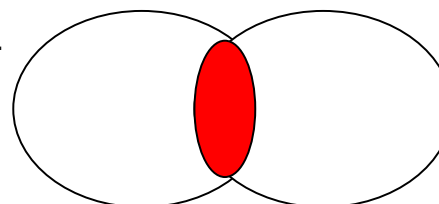
Artículos que incluyan “bevacizumab” pero que no tengan el término “breast”.



7086

**AND:** “bevacizumab” AND “breast”

Artículos que incluyan “bevacizumab” y al mismo tiempo “breast”.



695



## Pregunta PICO: estructura de pregunta clínica para iniciar una búsqueda

P: Paciente/Población/Patología/Problema/Edad: “niños con asma”

I: Intervención/Tratamiento Experimental/Exposición: “corticoides inhalados”

C: Control/Tratamiento alternativo (no siempre necesario): “beta agonistas”

O: Outcome/Resultado/Efecto beneficioso o adverso: “retraso del crecimiento”



En niños con asma, el uso de corticoides inhalados es más probable que retarse el crecimiento que el tratamiento estándar con beta agonistas?



Transformamos la pregunta PICO en palabras claves:

PubMed inhaled corticosteroids AND asthma AND growth delay AND child\*

Término truncado: \*

Child

Children



Results: 1 to 20 of 22

**Growth of asthmatic children** before long-term treatment with **inhaled corticosteroids**.

4. Moudiou T, Theophilatou D, Priftis K, Papadimitriou A.

*J Asthma*. 2003 Sep;40(6):667-71.

PMID: 14579998 [PubMed - indexed for MEDLINE]

[Related citations](#)

**Growth problems in children with asthma**.

5. Wolthers OD.

*Horm Res*. 2002;57 Suppl 2:83-7. Review.

PMID: 12065934 [PubMed - indexed for MEDLINE]

[Related citations](#)

**The use of inhaled corticosteroids in children with asthma**.

6. Kelly HW, Heidarian-Raissy H.

*Curr Allergy Asthma Rep*. 2002 Mar;2(2):133-43. Review.



## Término MeSH: Medical Subject Headings: "Método académico"

El término MeSH es el vocabulario controlado que se utiliza para indexar los artículos en PubMed (Medline), proporciona una manera normalizada de recuperar información que puede utilizar diferente terminología para describir el mismo concepto. Contiene encabezados y sub-encabezados. La base de datos consta de 33.000 términos ordenados en estructuras jerárquicas llamadas árboles.

- Strokes
- Apoplexy
- CVA (Cerebrovascular Accident)
- CVAs (Cerebrovascular Accident)
- Cerebrovascular Accident
- Cerebrovascular Accidents
- Cerebrovascular Apoplexy
- Apoplexy, Cerebrovascular
- Cerebrovascular Stroke
- Cerebrovascular Strokes
- Stroke, Cerebrovascular
- Strokes, Cerebrovascular
- Vascular Accident, Brain
- Brain Vascular Accident
- Brain Vascular Accidents
- Vascular Accidents, Brain
- Cerebral Stroke
- Cerebral Strokes
- Stroke, Cerebral
- Strokes, Cerebral
- Stroke, Acute
- Acute Stroke
- Acute Strokes
- Strokes, Acute
- Cerebrovascular Accident, Acute
- Acute Cerebrovascular Accident
- Acute Cerebrovascular Accidents
- Cerebrovascular Accidents, Acute

### Stroke MeSH

Previous Indexing:

- Cerebrovascular Disorders (1964-1999)
- Intracranial Arteriosclerosis (1965-1999)
- Intracranial Embolism and Thrombosis (1965-1999)

All MeSH Categories

Diseases Category

Nervous System Diseases

Central Nervous System Diseases

Brain Diseases

Cerebrovascular Disorders

**Stroke**

Brain Infarction

Brain Stem Infarctions +

Cerebral Infarction +

Stroke, Lacunar

All MeSH Categories

Diseases Category

Cardiovascular Diseases

Vascular Diseases

Cerebrovascular Disorders

**Stroke**

Brain Infarction

Brain Stem Infarctions +

Cerebral Infarction +

Stroke, Lacunar

MeSH

accidente cerebrovascular

- Cerebrovascular Trauma**
  1. Penetrating and nonpenetrating traumatic injuries to an extracranial or intracranial blood vessel that supplies the brain. This includes the CAROTID ARTERIES; VERTEBRAL ARTERIES; MENINGEAL ARTERIES; CEREBRAL ARTERIES; veins, and venous sinuses.  
Year introduced: 2000
- Basal Ganglia Cerebrovascular Disease**
  2. A pathological condition caused by impaired blood flow in the basal regions of cerebral hemispheres (BASAL GANGLIA), such as INFARCTION; HEMORRHAGE; or ISCHEMIA in vessels of this brain region including the lateral lenticulostriate arteries. Primary clinical manifestations include involuntary movements (DYSKINESIAS) and muscle weakness (HEMIPAREISIS).  
Year introduced: 2000
- Cerebrovascular Disorders**
  3. A spectrum of pathological conditions of impaired blood flow in the brain. They can involve vessels (ARTERIES; or VEINS) in the CEREBRUM, the CEREBELLUM, and the BRAIN STEM. Major categories include INTRACRANIAL ARTERIOVENOUS MALFORMATIONS; BRAIN ISCHEMIA; CEREBRAL HEMORRHAGE; and others.
- Cerebrovascular Circulation**
  4. The circulation of blood through the vessels of the BRAIN.  
Year introduced: 1964
- Stroke**
  5. A group of pathological conditions characterized by sudden, non-convulsive loss of neurological function due to BRAIN ISCHEMIA or INTRACRANIAL HEMORRHAGES. Stroke is classified by the type of tissue NECROSIS, such as the anatomic location, vasculature involved, etiology, age of the affected individual, and hemorrhagic vs. non-hemorrhagic nature. (From Adams et al., Principles of Neurology, 6th ed, pp777-810)  
Year introduced: 2008 (2000)





Subheadings:

- analysis
- anatomy and histology
- blood
- cerebrospinal fluid
- chemically induced
- classification
- complications
- congenital
- cytology
- diagnosis
- diet therapy
- drug therapy
- economics
- embryology
- enzymology
- epidemiology
- ethnology
- etiology
- genetics
- history
- immunology
- metabolism
- microbiology
- mortality
- nursing
- organization and administration
- parasitology
- pathology
- physiology
- physiopathology
- prevention and control
- psychology
- radiography
- radionuclide imaging
- radiotherapy
- rehabilitation
- statistics and numerical data
- surgery
- therapy
- ultrasonography
- urine
- veterinary
- virology

**Effect of Clopidogrel on the Risk and Functional Severity of Stroke Among High-Vascular-Risk Patients: A Prospective Cohort Study of Clopidogrel for Risk Reduction in Stroke (CLOVER) Trial**

Stroke. 2012;43(12):1855-62. doi: 10.1161/STROKEAHA.112.328888.

**Abstract**

**Background:** Clopidogrel is a P2Y12 receptor antagonist that is used for secondary prevention of atherothrombotic events. We evaluated the effect of clopidogrel on the risk and functional severity of stroke among high-vascular-risk patients.

**Methods:** In this prospective cohort study, we enrolled 10,000 patients with a history of stroke, transient ischemic attack, or peripheral vascular disease who were treated with clopidogrel. We used a validated algorithm to identify strokes and to assess their functional severity. We compared the risk and functional severity of stroke among patients treated with clopidogrel and those not treated with clopidogrel.

**Results:** During a median follow-up of 3.5 years, 1,000 patients (10%) had a stroke. The risk of stroke was significantly lower among patients treated with clopidogrel than among those not treated with clopidogrel (hazard ratio, 0.75; 95% confidence interval, 0.65-0.86; P<0.001). The functional severity of stroke was also significantly lower among patients treated with clopidogrel than among those not treated with clopidogrel (odds ratio, 0.75; 95% confidence interval, 0.65-0.86; P<0.001).

**Conclusions:** Clopidogrel treatment significantly reduced the risk and functional severity of stroke among high-vascular-risk patients.

[Association of clopidogrel pretreatment with mortality, cardiovascular events, and major bleeding among patients undergoing percutaneous coronary intervention: a systematic review and meta-analysis.](#)

Bellemain-Appaix A, O'Connor SA, Silvain J, Cucherat M, Beygui F, Barthélémy O, Collet JP, Jacq L, Bernasconi F, Montalescot G; ACTION Group. JAMA. 2012 Dec 19;308(23):2507-16. doi: 10.1001/jama.2012.50788. Review. PMID: 23287889 [PubMed - Indexed for MEDLINE] [Related citations](#)

[\[Safety and efficacy of various modalities of antiplatelet prophylaxis of ischemic stroke in elderly patients with non-valvular atrial fibrillation\].](#)

Shevelev VI, Kanorsky SG. Klin Med (Mosk). 2012;90(10):60-3. Russian. PMID: 23285766 [PubMed - Indexed for MEDLINE] [Related citations](#)

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PubMed search builder

("Stroke/therapy" [Mesh]) AND "clopidogrel" [Supplementary Concept]

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TI – Título: Ej. Clopidogrel[TI]

AU – Autor: EJ. Burton[AU]

No académico, pero muy práctico.

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- [Early vitreous hemorrhage after vitrectomy with preoperative \*\*intravitreal bevacizumab\*\* for proliferative \*\*diabetic\*\* retinopathy.](#)  
1. Sato T, Morita S, Bando H, Sato S, Ikeda T, Emi K.  
Middle East Afr J Ophthalmol. 2013 Jan;20(1):51-5. doi: 10.4103/0974-9233.106387.  
PMID: 23580852 [PubMed - in process] [Free PMC Article](#)  
[Related citations](#)
  
- [REPEATED \*\*INTRAVITREAL BEVACIZUMAB\*\* INJECTION WITH AND WITHOUT MACULAR GRID PHOTOCOAGULATION FOR TREATMENT OF DIFFUSE \*\*DIABETIC\*\* MACULAR EDEMA.](#)  
2. Solaiman KA, Diab MM, Dabour SA.  
Retina. 2013 Mar 27. [Epub ahead of print]  
PMID: 23538584 [PubMed - as supplied by publisher]  
[Related citations](#)
  
- [Intravitreal \*\*bevacizumab\*\* treatment for refractory \*\*diabetic\*\* macular edema.](#)  
3. Yuksel E, Ozdek S, Yuksel N, Hasanreisoglu B.  
Int Ophthalmol. 2013 Mar 19. [Epub ahead of print]  
PMID: 23508574 [PubMed - as supplied by publisher]  
[Related citations](#)
  
- [\*\*INTRAVITREAL BEVACIZUMAB\*\* \(AVASTIN\) FOR PERSISTENT NEW VESSELS IN \*\*DIABETIC\*\* RETINOPATHY \(IBEPE STUDY\): 1-Year Results.](#)  
4. Cintra LP, Costa RA, Ribeiro JA, Calucci D, Scott IU, Messias A, Jorge R.  
Retina. 2013 Mar 15. [Epub ahead of print]  
PMID: 23508078 [PubMed - as supplied by publisher]  
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[REPEATED INTRAVITREAL BEVACIZUMAB INJECTION WITH AND WITHOUT MACULAR GRID](#)

1. [PHOTOCOAGULATION FOR TREATMENT OF DIFFUSE \*\*DIABETIC\*\* MACULAR EDEMA.](#)

**Solaiman KA, Diab MM, Dabour SA.**  
Retina. 2013 Mar 27. [Epub ahead of print]  
PMID: 23538584 [PubMed - as supplied by publisher]  
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[Intravitreal bevacizumab and/or macular photocoagulation as a primary treatment for diffuse](#)

2. [diabetic macular edema.](#)

**Solaiman KA, Diab MM, Abo-Elenin M.**  
Retina. 2010 Nov-Dec;30(10):1638-45. doi: 10.1097/IAE.0b013e3181e1ed07.  
PMID: 20838357 [PubMed - indexed for MEDLINE]  
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[Mini-series: II. clinical aspects. clinically relevant CYP450-mediated drug \*\*interactions\*\* in the ICU.](#)

1. [Spriet I, Meersseman W, de Hoon J, von Winckelmann S, Wilmer A, Willems L.](#)  
Intensive Care Med. 2009 Apr;35(4):603-12. doi: 10.1007/s00134-008-1383-2. Epub 2009 Jan 9. Review.  
PMID: 19132344 [PubMed - indexed for MEDLINE]  
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bevacizumab diabetic macular

## Clinical Study Categories

Category: Therapy  
Scope: Narrow

## Systematic Reviews

### Results: 5 of 42

**Stereotactic Radiotherapy for Neovascular Age-Related Macular Degeneration: 52-Week Safety and Efficacy Results of the INTREPID Study.**

Jackson TL, Chakravarthy U, Kaiser PK, Slakter JS, Jan E, Bandello F, O'Shaughnessy D, Gertner ME, Danielson L, Moshfeghi DM, et al. *Ophthalmology*. 2013 Mar 12; . Epub 2013 Mar 12.

**Combined vitrectomy and intravitreal injection versus combined laser and injection for treatment of intractable diffuse diabetic macular edema.**

Saeed AM. *Clin Ophthalmol*. 2013; 7:283-97. Epub 2013 Feb 14.

**A randomised double-masked trial comparing the visual outcome after treatment with ranibizumab or bevacizumab in patients with neovascular age-related macular degeneration.**

Krebs I, Schmetterer L, Boltz A, Told R, Vécsei-Marlovits V, Egger S, Schönherr U, Haas A, Ansari-Shahrezaei S, Binder S, et al. *Br J Ophthalmol*. 2013 Mar; 97(3):266-71. Epub 2013 Jan 3.

### Results: 5 of 26

**Genetic Influences on the Outcome of Anti-Vascular Endothelial Growth Factor Treatment in Neovascular Age-related Macular Degeneration.**

Abedi F, Wickremasinghe S, Richardson AJ, Islam AF, Guymer RH, Baird PN. *Ophthalmology*. 2013 Apr 9; . Epub 2013 Apr 9.

**A systematic review of intravitreal bevacizumab for the treatment of diabetic macular edema.**

Fortin P, Mintzes B, Innes M. *CADTH Technol Overv*. 2013; 3(1):e3203. Epub 2013 Feb 1.

**Current treatments in diabetic macular oedema: systematic review and meta-analysis.**

Ford JA, Lois N, Royle P, Clar C, Shyangdan D, Waugh N. *BMJ Open*. 2013; 3(3). Epub 2013 Mar 1.

**Anti-vascular endothelial growth factor for macular oedema secondary to branch retinal vein occlusion.**

Mitry D, Bunce C, Charteris D.



El método de búsqueda en PubMed (términos MeSH): es útil para completar el programa MADRE

### 5.1.a Ensayos clínicos disponibles para la indicación clínica evaluada

### 5.3.a Revisiones sistemáticas publicadas

Descripción de la búsqueda bibliográfica: criterios y resultados de la misma.

### 5.3.b.1 Comparaciones Indirectas publicadas

En fecha xx/xx/xx se realizó búsqueda bibliográfica en Medline. Se dispone de xx ensayos comparaciones indirectas publicados y de xx network metanálisis o MTC.

## 6. EVALUACIÓN DE LA SEGURIDAD.

### 6.1.a Descripción de la búsqueda bibliográfica

Descripción de la búsqueda bibliográfica: estrategia y resultados de la misma.

**XI** CURSO DE EVALUACIÓN Y  
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# 5 Base de datos de Ensayos Clínicos: Clinicaltrials.gov

ClinicalTrials.gov

## Search for Studies

Example: "Heart attack" AND "Los Angeles"

ClinicalTrials.gov currently lists 143,244 studies with locations in all 50 states and in 182 countries.

23 studies found for: bevacizumab AND prostate

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Rank	Status	Study
1	Completed	<b>Bevacizumab in Treating Patients With Relapsed Prostate Cancer That Did Not Respond to Hormone Therapy</b> <b>Conditions:</b> Adenocarcinoma of the Prostate; Recurrent Prostate Cancer; Stage I Prostate Cancer; Stage IIA Prostate Cancer; Stage IIB Prostate Cancer; Stage III Prostate Cancer <b>Interventions:</b> Biological: bevacizumab; Other: laboratory biomarker analysis
2	Active, not recruiting	<b>Neoadjuvant Bevacizumab Plus Docetaxel in High Risk Patients With Prostate Cancer Undergoing Radical Prostatectomy</b> <b>Conditions:</b> Prostate Cancer; Adenocarcinoma of the Prostate <b>Interventions:</b> Drug: Bevacizumab; Drug: Docetaxel
3	Recruiting	<b>Safety Study &amp; Effectiveness of Docetaxel With RAD001 and Bevacizumab in Men With Advanced Prostate Cancer</b> <b>Condition:</b> Prostate Cancer <b>Intervention:</b> Drug: RAD001, Docetaxel, Bevacizumab
4	Completed	<b>Bevacizumab in Treating Patients With Relapsed Prostate Cancer That Did Not Respond to Hormone Therapy</b> <b>Condition:</b> Prostate Cancer <b>Intervention:</b> Biological: bevacizumab
5	Active, not recruiting Has Results	<b>Docetaxel, Thalidomide, Prednisone, and Bevacizumab to Treat Metastatic Prostate Cancer</b> <b>Condition:</b> Prostatic Neoplasms <b>Interventions:</b> Drug: Docetaxel; Drug: Thalidomide; Drug: Prednisone; Biological: bevacizumab; Genetic: polymorphism analysis; Other: immunoenzyme technique; Other: laboratory biomarker analysis; Other: pharmacological study

Effect of Docetaxel on the Rate and Functional Severity of Stroke Among High-Risk Prostate Cancer Patients  
A Prospective Cohort Study of the Impact for High-Risk Prostate Cancer Patients and Patients with Unknown Status  
Background: Prostate cancer is the leading cause of cancer death among men in the United States. High-risk prostate cancer patients are at increased risk for stroke. Docetaxel, a taxane chemotherapy agent, is commonly used in the treatment of prostate cancer. The purpose of this study was to evaluate the effect of docetaxel on the rate and functional severity of stroke among high-risk prostate cancer patients and patients with unknown status.



## 6 Guías de práctica clínica: Guía Salud, Fisterra, National Guideline Clearinghouse, NCCN.

guiasalud.es



Biblioteca de Guías de Práctica Clínica del Sistema Nacional de Salud




















### ¿Qué es una Guía de Práctica Clínica?

Las Guías de Práctica Clínica (GPC) son un conjunto de "recomendaciones desarrolladas de forma sistemática para ayudar a profesionales y pacientes a tomar decisiones sobre la atención sanitaria más apropiada, y a seleccionar las opciones diagnósticas o terapéuticas más adecuadas a la hora de abordar un problema de salud o una condición clínica específica"<sup>1</sup>.

Las GPC tienen la potencialidad de reducir la variabilidad y mejorar la práctica clínica.

#### GUÍAS DE PRÁCTICA CLÍNICA INCLUIDAS EN EL CATÁLOGO (clasificadas según CIE-9)

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- ▷  Causas externas(6)
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- ▷  Enfermedades de la piel y del tejido subcutáneo(9)
- ▷  Enfermedades de la sangre y de los órganos hematopoyéticos(2)
- ▷  Enfermedades del aparato digestivo(15)
- ▷  Enfermedades del aparato genitourinario(10)
- ▷  Enfermedades del aparato respiratorio(12)
- ▷  Enfermedades del sistema circulatorio(19)
- ▷  Enfermedades del sistema nervioso y de los órganos de los sentidos(12)
- ▷  Enfermedades del sistema osteo-mioarticular y tejido conectivo(9)
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- ▷  Factores que influyen en la Salud(6)
- ▷  Lesiones y envenenamientos(1)
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Mostrando 3 resultados:

### Guía de Práctica Clínica sobre Diabetes Mellitus Tipo 1

Situación: Incluida

Fecha de edición: 01/05/2012

Entidades elaboradoras: Agencia de Evaluación de Tecnologías Sanitarias del País Vasco-Osteba

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GuíaSalud Biblioteca - 15/04/2013

### Guía de práctica clínica sobre el manejo de los lípidos como factor de riesgo cardiovascular

Situación: Caducada

Fecha de edición: 01/01/2008

Entidades elaboradoras: Osakidetza y Departamento de Sanidad. Administración de la CC.AA. del País Vasco

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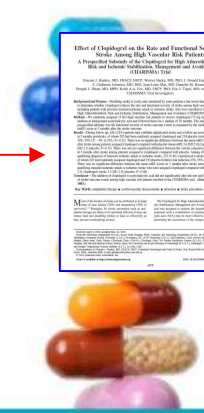
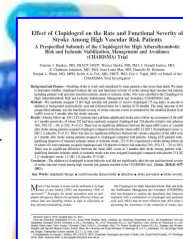
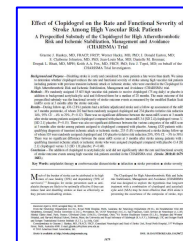
GuíaSalud Biblioteca - 01/03/2013

### Guía de Práctica Clínica sobre Diabetes Tipo 2

Situación: Incluida

Fecha de edición: 01/07/2008

Entidades elaboradoras: Agencia de Evaluación de Tecnologías Sanitarias del País Vasco - Osteba





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## Guías clínicas

Las guías de práctica clínica de **Fisterra**, son recomendaciones para profesionales de la salud desarrolladas de forma sistemática para orientar al profesional a tomar las decisiones adecuadas cuando el paciente tiene una enfermedad determinada.

En fisterra.com disponemos de 473 guías clínicas de las cuales 9 pueden consultarse en abierto y para las restantes es necesario registro.

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Total: 473

### ALGORITMOS

Total: 233

### IMÁGENES

Total: 403

### MEDICAMENTOS

Total: 1043

### INFORMACIÓN PARA PACIENTES

Total: 138

### TÉCNICAS ATENCIÓN PRIMARIA

Total: 79

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**Effect of Ophthalmic on the Rate and Intraocular Severity of Stroke Among High Vascular Risk Patients: A Prospective Cohort of the Ocular in the Interventional and Ocular in the Interventional (Ocular in the Interventional) Trial**

Background: High vascular risk patients (HVRP) are at high risk of stroke. The Ocular in the Interventional and Ocular in the Interventional (Ocular in the Interventional) trial is a prospective cohort study of HVRP. The purpose of this study was to evaluate the effect of ophthalmic on the rate and intraocular severity of stroke among HVRP.

Methods: We conducted a prospective cohort study of HVRP. The study included 1000 HVRP who were followed up for 12 months. The primary outcome was the rate of stroke. The secondary outcome was the intraocular severity of stroke.

Results: The rate of stroke was significantly higher in the ophthalmic group compared to the control group. The intraocular severity of stroke was also significantly higher in the ophthalmic group.

Conclusion: Ophthalmic increases the rate and intraocular severity of stroke among HVRP.



## National Guideline Clearinghouse

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Compare Guidelines

1. **The use of bevacizumab in metastatic breast cancer.** 2009 Apr 17. NGC:007694  
Program in Evidence-based Care - State/Local Government Agency [Non-U.S.]. [View all guidelines by the developer\(s\)](#)
2. **Bevacizumab (first-line), sorafenib (first- and second-line), sunitinib (second-line) and temsirolimus (first-line) for the treatment of advanced and/or metastatic renal cell carcinoma.** 2009 Aug. NGC:007628  
National Institute for Health and Clinical Excellence (NICE) - National Government Agency [Non-U.S.]. [View all guidelines by the developer\(s\)](#)
3. **Bevacizumab in combination with capecitabine for the first-line treatment of metastatic breast cancer.** 2012 Aug. NGC:009311  
National Institute for Health and Clinical Excellence (NICE) - National Government Agency [Non-U.S.]. [View all guidelines by the developer\(s\)](#)
4. **First-line systemic chemotherapy in the treatment of advanced non-small cell lung cancer.** 2009 May 22 (revised 2010 Feb 3). NGC:007692  
Program in Evidence-based Care - State/Local Government Agency [Non-U.S.]. [View all guidelines by the developer\(s\)](#)
5. **The use of inhibitors of angiogenesis in patients with inoperable locally advanced or metastatic renal cell cancer: guideline recommendations.** 2009 Apr 30. NGC:007277  
Program in Evidence-based Care - State/Local Government Agency [Non-U.S.]. [View all guidelines by the developer\(s\)](#)
6. **Age-related macular degeneration.** 1998 Sep (revised 2008 Sep; republished 2011). NGC:007151  
American Academy of Ophthalmology - Medical Specialty Society. [View all guidelines by the developer\(s\)](#)



**Guideline Title**

The use of **bevacizumab** in metastatic breast cancer.

You are leaving the National Guideline Clearinghouse

The screenshot shows the National Guideline Clearinghouse interface. At the top, it says 'AHRQ Agency for Healthcare Research and Quality' with the tagline 'Advancing Excellence in Health Care' and the website 'www.ahrq.gov/'. Below this is a navigation bar with links for 'Visit: National Quality Measures Clearinghouse | Health Care Innovations Exchange | AHRQ Home' and a 'Sign In' button. The main header includes 'National Guideline Clearinghouse' and a search bar containing 'bevacizumab'. A search button and links for 'Search Tips', 'Advanced Search', and 'About Search' are also present. The left sidebar contains a 'Home' link and a 'Guidelines' section with sub-links: 'Browse', 'By Topic', 'By Organization', 'Guidelines in Progress', 'Guideline Index', 'Guideline Archive', and 'Related NQMC Measures'. Below this are 'Expert Commentaries', 'Guideline Syntheses', 'Guideline Matrix', 'Guideline Resources', 'Annotated Bibliographies', 'Compare Guidelines', 'FAQ', 'Submit Guidelines', and 'About'. The main content area displays the 'Guideline Summary' for 'The use of bevacizumab in metastatic breast cancer.' It includes the 'Bibliographic Source(s)' (Dent R, Haynes AE, Enright K, Hamm C, Trudeau M, Eisen A. The use of bevacizumab in metastatic breast cancer. Toronto (ON): Cancer Care Ontario (CCO); 2009 Apr 17. 24 p.(CED-CCO special advice report; no. 12). [24 references]) and the 'Guideline Status' (This is the current release of the guideline. Please visit the Cancer Care Ontario Web site for details on any new evidence that has emerged and implications to the guidelines.). At the bottom, there are tabs for 'Jump To', 'Guideline Classification', and 'Related Content'. The 'Related Content' tab is active, showing a list of links: Scope, Methodology, Recommendations, Evidence Supporting the Recommendations, Benefits/Harms of Implementing the Guideline Recommendations, Contraindications, Qualifying Statements, Implementation of the Guideline, Institute of Medicine (IOM) National Healthcare Quality Report Categories, Identifying Information and Availability, and Disclaimer.

The cover page features the logos for 'cancer care ontario' (program in evidence-based care) and 'action cancer ontario' (programme de soins fonde sur des preuves). The title is 'CED-CCO Special Advice Report 12 ARCHIVED 2012' followed by 'The Use of Bevacizumab in Metastatic Breast Cancer'. The authors are listed as 'R. Dent, A.E. Haynes, K. Enright, C. Hamm, M. Trudeau, and A. Eisen'. The report date is 'April 17, 2009'. A box at the bottom states: 'This CED-CCO Special Advice Report was ARCHIVED IN 2012. The report, which consists of consists of a Summary and a Full Report, is available on the CCO web site (<http://www.cancercare.on.ca>).

The National Comprehensive Cancer Network® (NCCN®), a not-for-profit alliance of 23 of the world's leading cancer centers is dedicated to improving the quality and effectiveness of care provided to patients with cancer.



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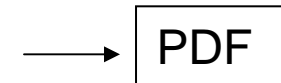
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# Prostate Cancer

Version 2.2013

NCCN.org



## Summary of Guidelines Updates

Initial Prostate Cancer Diagnosis, Staging Workup, Recurrence Risk (PROS-1)

Very Low-Risk, Low-Risk: Initial Therapy, Adjuvant Therapy (PROS-2)

Intermediate-Risk: Initial Therapy, Adjuvant Therapy (PROS-3)

High-Risk, Locally Advanced, and Metastatic (PROS-4)

Monitoring (PROS-5)

Post-Radical Prostatectomy Recurrence (PROS-6)

Post-Radiation Therapy Recurrence (PROS-7)

Advanced Disease: Systemic Therapy (PROS-8)

Advanced Disease: Additional Systemic Therapy for Castration-Recurrent Prostate

Principles of Life Expectancy Estimation (PROS-A)

Principles of Active Surveillance (PROS-B)

Principles of Radiation Therapy (PROS-C)

Principles of Surgery (PROS-D)

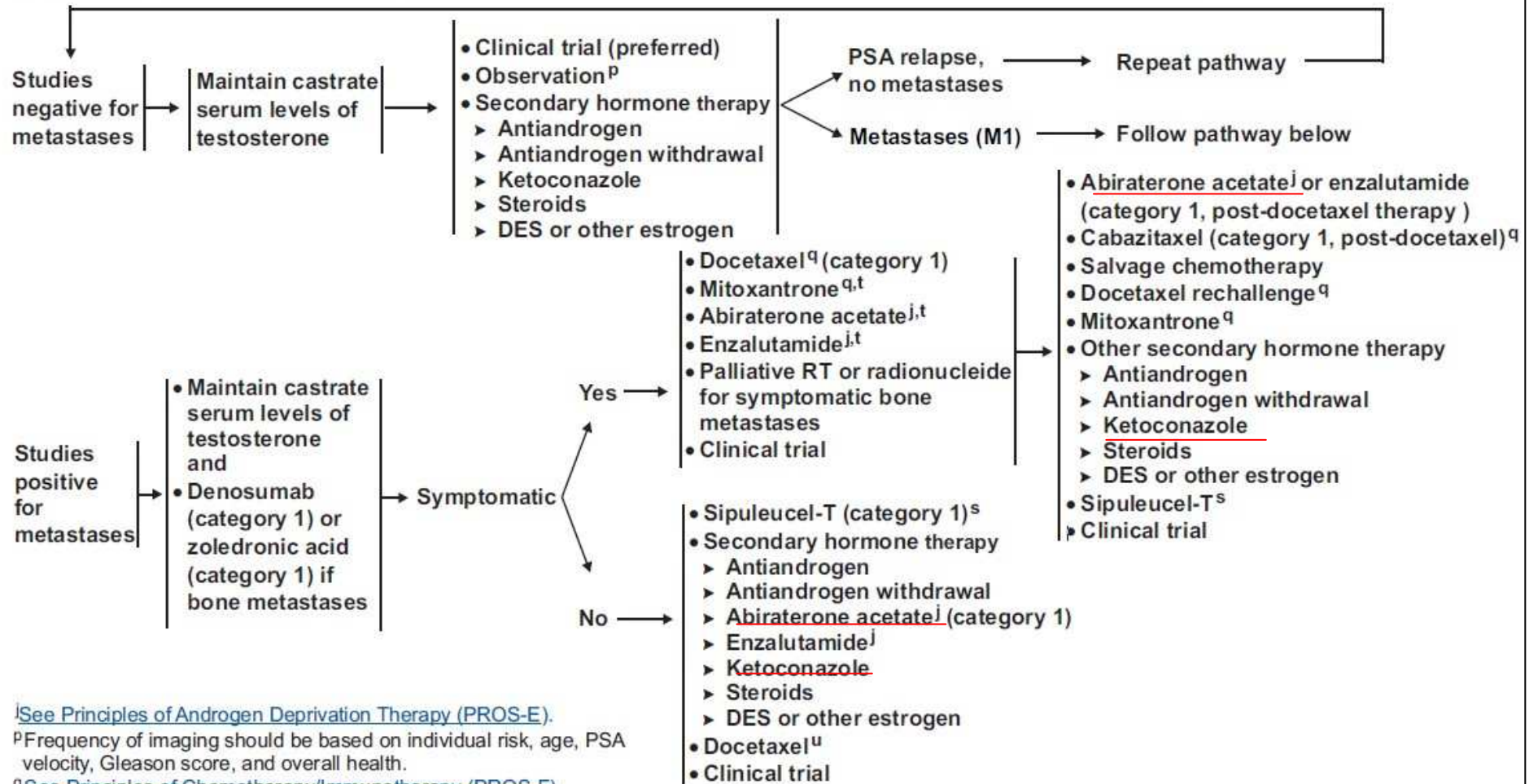
Principles of Androgen Deprivation Therapy (PROS-E)

Principles of Chemotherapy/Immunotherapy (PROS-F)

Staging (ST-1)



## ADVANCED DISEASE: ADDITIONAL SYSTEMIC THERAPY FOR CASTRATION-RECURRENT PROSTATE CANCER



<sup>j</sup>See Principles of Androgen Deprivation Therapy (PROS-E).

<sup>P</sup>Frequency of imaging should be based on individual risk, age, PSA velocity, Gleason score, and overall health.

<sup>q</sup>See Principles of Chemotherapy/Immunotherapy (PROS-F).

<sup>s</sup>Sipuleucel-T is appropriate for asymptomatic or minimally symptomatic patients with ECOG performance status 0-1. Sipuleucel-T is not indicated in patients with hepatic metastases or life expectancy <6 months.

<sup>t</sup>For patients who are not candidates for docetaxel-based regimens.

<sup>u</sup>Although most patients without symptoms are not treated with chemotherapy, the survival benefit reported for docetaxel applies to those with or without symptoms. Docetaxel may be considered for patients with signs of rapid progression or hepatic metastases despite lack of symptoms.

Note: All recommendations are category 2A unless otherwise indicated.

**Las guías de práctica clínica (Guía Salud, Fisterra, National Guideline Clearinghouse, NCCN): son útiles para completar el programa MADRE**

3.2 Área descriptiva del problema de salud

3.2.b Tratamiento actual de la enfermedad: evidencias

3.3 Características comparadas con otras alternativas similares

5.4.1 Guías de Práctica clínica

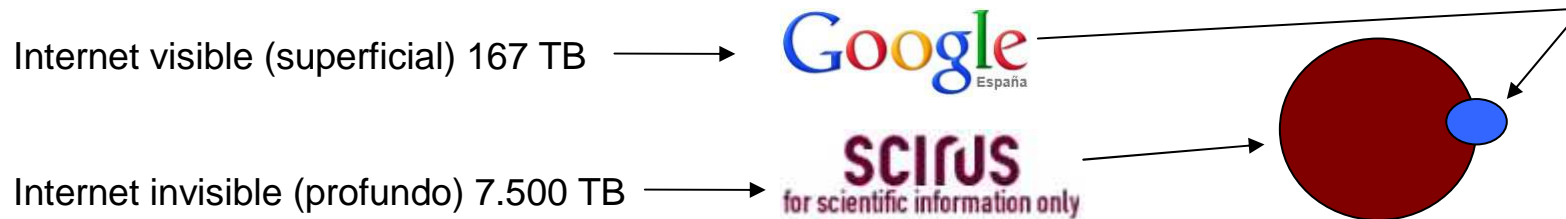
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## 7 Literatura gris e Internet invisible: Metabuscador Scirus



Literatura gris: El conjunto de documentos, de muy diversa tipología, que no son editados o que se publican pero distribuyen a través de canales poco convencionales (tesis doctorales, actas de congresos, informes de investigación, memorias, proyectos, patentes, normas, etc.).

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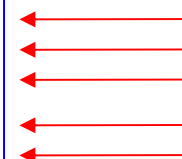
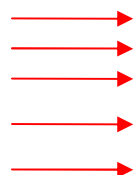
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- 1. [Phase 2 study of neoadjuvant docetaxel plus bevacizumab in high-risk localized prostate cancer](#). **Ross, Robert W / Galsky, Matthew D / Febbo, Phil /** doi:10.1002/cncr.27416  
...high-risk localized **prostate** cancer remains inadequate. **Bevacizumab** plus docetaxel and **bevacizumab** is safe, and results...high  
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- 3. [Bevacizumab treatment of prostate cancer](#). **Small, Alexander C / Oh, William K,** *Expert opinion on* doi:10.1517/14712598.2012.704015  
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