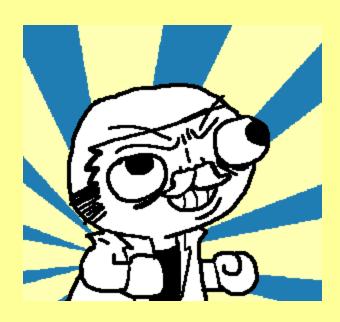
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Finding a Journal Article



What is a Journal?

 A collection of articles focusing on one subject or profession

Examples:

- Journal of the American Medical Association
- Nursing



- Is published regularly every week, month, etc.
- Articles are reviewed by experts in the field.

What is a Journal? Cont.

 The end of a journal article will have a list of references, or sources of information referred to in the

article.

References

Conclusion

In conclusion, adherence to low-risk dietary and lifestyle factors was associated with significant reductions in the incidence of self-reported hypertension and could have the potential to prevent a large proportion of new-onset hypertension occurring among young women. Prevention of hypertension would, in turn, have major public health hencefits.

Author Contributions: Dr Forman had full access to all of the data in the study and takes responsibility for the integrity of the data and the accuracy of the data analysis.

 Study concept and design: Forman, Stampfer, Curhan. Acquisition of data: Forman, Stampfer, Curhan. Analysis and interpretation of data: Forman, Stampfer, Curhan

Drafting of the manuscript: Forman.

Critical revision of the manuscript for important intellectual content: Formen, Stampfer, Curhan.

Statistical analysis: Forman.

Obtained funding: Forman, Stampfer, Curhan.

Administrative, technical, or material support: Forman,
Stampfer, Curhan.

Study supervision: Curhan

Financial Disclosures: None reported.

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Role of the Sponsor: The American Heart Association and the National institutes of Health had no role in the collection, management, analysis, or interpretation of the data and had no role in the preparation, review, or approval of the manuscript.

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What is a Journal? Cont.

 A <u>scholarly</u> journal will have articles on the results of scientific studies and research.

Migraine Headache in Middle Age and Late-Life Brain Infarcts

Ann I. Scher, PhD Larus S. Gudmundsson, MSc

Sigurdur Sigurdsson, MSc Anna Ghambaryan, MD Thor Aspelund, PhD

Guđny Eiriksdottir, MSc

Mark A. van Buchem, MD, PhD Vilmundur Gudnason, MD, PhD Lenore J. Launer, PhD

IGRAINE, A COMMON NEUrowascular disorder that affects approximately 11% of adults and 5% of children worldwide, is more common in women than men and is most prevalent in the third and fourth decades of life. Although a severe migraine attack is among the most disabling of neurological disorders, a many individuals with migraine do not consult physicians.

Approximately one-third of individuals with migratine experience neurological aura symptoms before headache onset (migraine with aura), usual consisting of transient visual, and also sensory, aphasic, or motor disturbances. Recent evidence sugesses that migraine with aura is associated with an increased risk of clinically evident stroke or coronary artery disease.²⁸

Migraine has also been linked to silent infart-like lesions (identified on magnetic resonance imaging [MRI] regardless of clinical manifestations) in a community-based cohort evaluated as a part of the CAMERA study. ¹⁰ which showed that individuals with migraine had a 7-fold increased risk for

See also p 2594 and Patient Page.

Context Migraine is considered to be an episodic condition with no long-term consequences. However, recent studies suggest that migraine attacks may be associated with pathologic changes in the brain, particularly in the cerebellum.

Objective To determine whether individuals not reporting headache compared with individuals reporting migraine symptoms, particularly aura, in midlife are at increased risk of late-life infarct-like lesions found on magnetic resonance imaging (MRI) without consideration of clinical symptoms.

Design, Setting, and Participants: A population-based study of men and women in Reykjavik, Iceland (cohort born 1907-1935; n=4689; 57% women) were followed up since 1967, examined, and interviewed about migraine symptoms in midlife (mean age, 51 years; range, 33-65 years). Between 2002 and 2006, more than 26 years later, brain AMBs were performed. Participants reporting headaches once or more per morth were asked about migraine symptoms including nausea, unilateral location, photophobia, visual disturbance, and numbness. These individuals with headache were classified as having migraine without aura, migraine with aura, or normigraine headache. A comprehensive cardiovascular risk assessment was performed at both examinations.

Main Outcome Measure Presence of infarct-like lesions (total) and specifically located in the cortical, subcortical, and cerebellar regions.

Results Infarct-like lesions were present in 39.3% of men and 24.6% of women. After adjusting for age, sex, and follow-up time, compared with those not reporting headaches once or more per month (n=3243), those with midlife migraine with aura (n=361) had an increased risk of late-life infarct-like lesions (adjusted odds ratio [OR], 14,95% confidence interval [CI], 1.1-1.8) that specifically reflected an association with cerebellar lesions in women (prevalence of infarcts 23.0% for women with migraine with aura vs 14.5% for women not reporting headaches, adjusted OR, 1.9, 95% CI, 1.4-2.6 vs a 19.3% prevalence of infarcts for men with milgraine with aura vs 14.5% for headaches, adjusted OR, 1.0, 95% CI, 0.6-1.8; P<.04 for interaction by sex). Migraine without aura and nonmigraine headaches were not associated with an increased risk.

Conclusions Migraine with aura in midlife was associated with late-life prevalence of cerebellar infarct-like lesions on MRI. This association was statistically significant only for women. This is consistent with the hypothesis that migraine with aura in midlife is associated with late-life vascular disease in the cerebellum and in women.

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infarcts in the cerebellum compared with controls, an association that was strongest in those with aura and frequent attacks (at least monthly).

Although the precise etiology linking migraine with aura and vascular disease is uncertain, ^{5,0,1} the degree to which migraine is a marker or risk factor for brain changes that may have

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Print Journals

- The library subscribes to about 10 nursing and medical journals that have articles on diseases and treatment found in primary care.
- All issues are kept at least 5 years.
- Back issues are kept in the Medical area in alphabetical order by journal title, then by date.
- •To locate an article on a specific topic, search in the online databases to find the journal, issue date, article title and page number.
- •* SEE PowerPoint on "Finding a Print Journal Article" for Instructions.

Electronic Journals

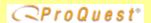
 Many journals published in print, are also put into digital format.

Digital articles are put into a database.

 Articles in the database can be searched by keyword or topic.

Databases of Medical Journals

The library subscribes to several databases that focus only on health and medical journals.



Health & Medical Complete

This database contains the most articles.



Health Reference Center Academic

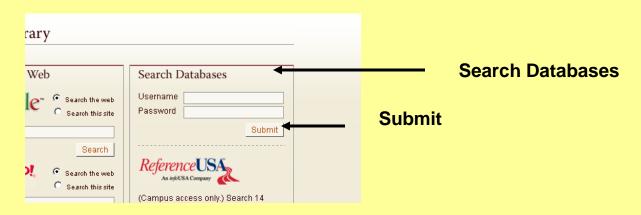
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See the slide show on "Finding a Print Journal Article."

Databases, cont.

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- Go to www.kingslibrary.org
- Enter the username and password under "Search Databases." (Get from library staff)



Click "Submit."

Getting to databases--ProQuest

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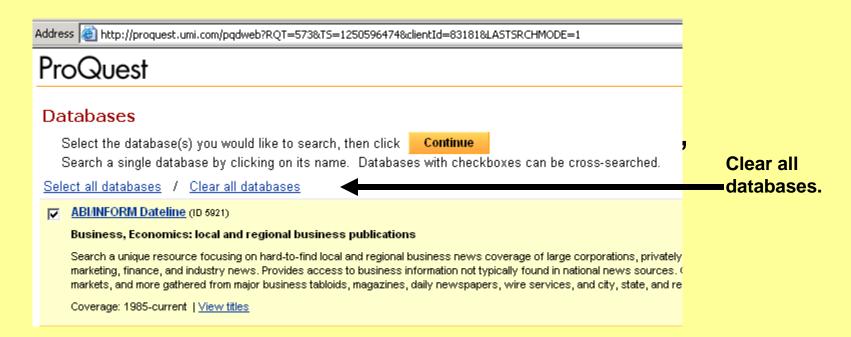


- Click the gray box "Connect to Proquest."
- Click on "Select multiple databases."



Databases--Proquest, cont.

Click on "Clear All Databases."



Databases--Proquest, cont.

 Scroll down and check the boxes for <u>Nursing & Allied Health Source</u> and <u>Proquest Health & Medical Complete</u> as shown:

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Databases--Proquest, cont.

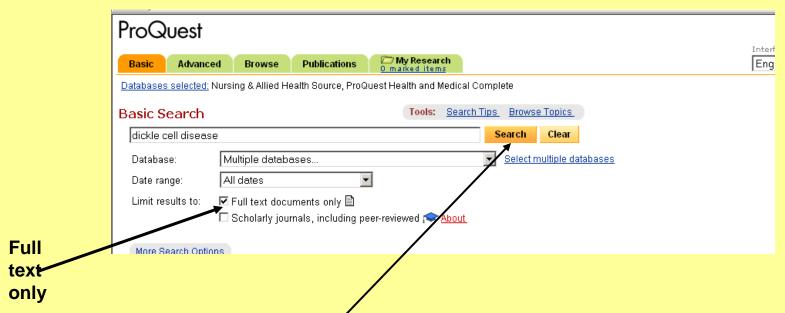
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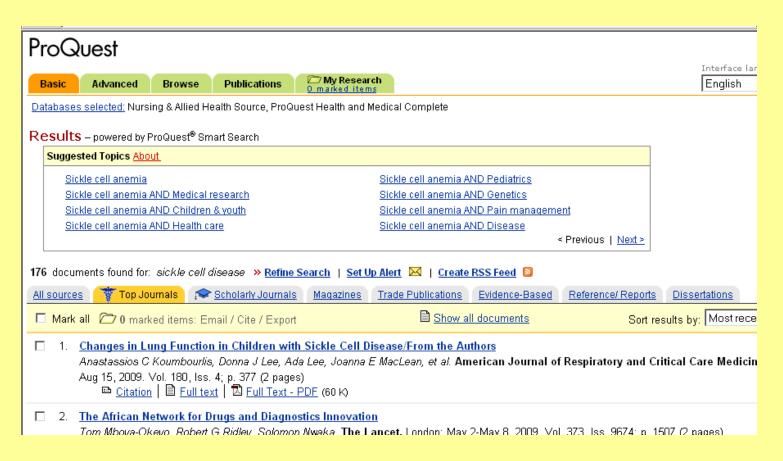
 Type your topic into the box and click "Search."

The first screen of the search results of is shown below.



Click on the "Top Journals" tab above the article titles.

If you want to narrow your search, select one of the "Suggested topics."



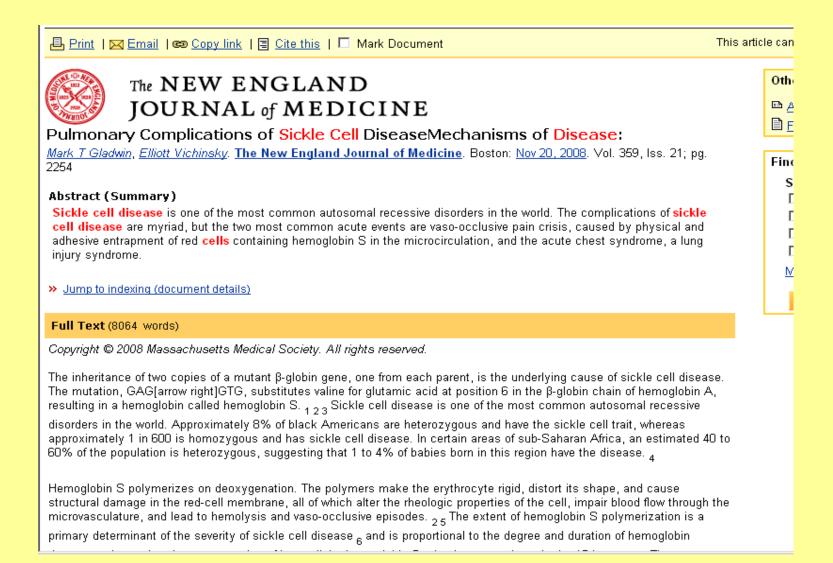
Here are the items of information given for each article in the list of search results.

*Please note that you will need this information in this basic format for your list of references.

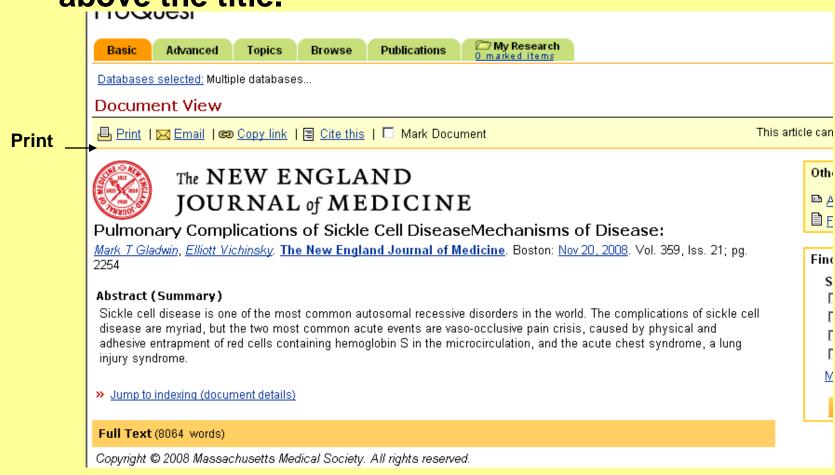


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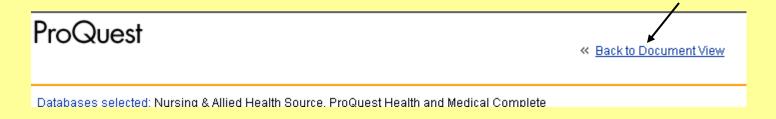
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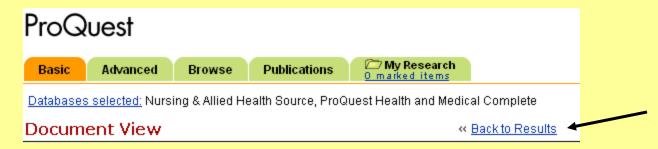
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