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2nd, revised edition

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There is no other time in life when the provision of adequate and balanced nutrition is of greater importance than during infancy and childhood. During this dynamic phase characterized by rapid growth, development and developmental plasticity, a sufficient amount and appropriate composition of nutrients both in health and disease are of key importance for growth, functional outcomes such as cognition and immune response, and the metabolic programming of long-term health and well-being.

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Editors
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The immature brain is vulnerable to stressors that may produce brain damage, leading to neurological dysfunction in survivors. The publication provides new insights into the mechanisms of injury and neuroprotection for developmental brain injuries and functional outcomes. Many aspects of neural progenitors in the response to and recovery from neonatal brain injuries are highlighted as well as reviews of preclinical models of encephalopathy of prematurity. Fyn in neurodevelopment and brain injury and perinatal infection. Further articles include information on the ethics of treatment of neonatal hypoxic-ischemic (HI) encephalopathy, hypoxia gene signaling and other caspase signaling pathways, modulation of p53 and arachidonic acid mechanisms for therapeutic benefit, and neurodevelopmental outcomes of experimental HI. Translational science contributions inform on important clinical areas, including ventilation-induced brain injury, in vivo monitoring of cerebral hemodynamics during HI and hypothermia and the effect of sepsis/inflammation in blocking the therapeutic effect of hypothermia in a neonatal HI model. This special issue is recommended to clinicians and basic and translational scientists who are interested in the developing nervous system, the mechanisms of injury to identify new therapeutic targets and the effect of both endogenous and exogenous cell-based attempts to support recovery from injury.

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Using and Understanding Medical Statistics
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David E. Matthews
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The fifth revised edition of this highly successful book presents the most extensive enhancement since Using and Understanding Medical Statistics was first published 30 years ago. Without question, the single greatest change has been the inclusion of source code, together with selected output, for the award-winning, open-source, statistical package known as R. This innovation has enabled the authors to de-emphasize formulae and calculations, and let software do all of the ‘heavy lifting’.

This edition also introduces readers to several graphical statistical tools, such as Q-Q plots to check normality, residual plots for multiple regression models, funnel plots to detect publication bias in a meta-analysis and Bland-Altman plots for assessing agreement in clinical measurements. New examples that better serve the expository goals have been added to a half-dozen chapters. In addition, there are new sections describing exact confidence bands for the Kaplan-Meier estimator, as well as negative binomial and zero-inflated Poisson regression models for over-dispersed count data.

The end result is not only an excellent introduction to medical statistics, but also an invaluable reference for every discerning reader of medical research literature.

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Low birthweight, caused by premature birth, poor intrauterine growth, or both, is known to be a strong predictor of morbidity and mortality risks in the first year of life and beyond. It has to be born in mind, though, that premature infants may need different clinical and nutritional interventions and are at risk for different morbidities than those small for gestational age.

This publication focuses on three main subjects: Global epidemiology, catch-up growth, and feeding practices. These topics have been selected to provide a solid contextual basis for the nature and extent of the problem, highlighting changes in prevalence and risk across different healthcare settings: The available data strongly suggest that growth outcomes are dependent on a multitude of environmental factors that interact with nutrient intakes. Epidemiology, modern technology and the latest science are brought together to promote a better understanding of the short- and long-term needs and outcomes of low-birthweight babies, depending on whether they are born too small or too early.

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