

How to manage my references by End Note Web?

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Scenario

- I have many references, they are so many that I can't recall where I have kept them in my folders!
- Different journals require different formatting style for references.
- I just wish I can change the output style of the references easily, without much worrying in typo errors or inconsistent formatting.
- Inserteing new referance into middle of my paragraphs, I need to update many references' order

• This is crazy!

With *EndNote Web*, manage references can be easier than you think! Why?



Why *EndNote Web*?

EndNote Web can help you to manage your references in a simple two-steps process ...

- Step 1: Manage references
 - Collect references
 - Organize, share and collaborate
- Step 2: Format references
 - Cite references while writing (*Cite While You Write*)
 - Get reference list generated automatically
 - Change the reference style in few clicks!

So simple! Isn't it? Let start to get your references organize now ...



How to start?

Here are the simple steps to make your writing experience a happier one ...

- 1. Create a free *EndNote Web* account
- 2. Collect references from *Web of Science* and various databases
- 3. Manage, organize and share references
- Download and installing the "Cite While You Write" Plug-in (only do it once!)
- 5. Inserting your references and be a happy writer!

... because references are automatically generated and you can change the style with just few clicks!



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Manage, collect, organize and format ... All in few tabs





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Get references organized in groups! ... For easier managing and retrieval



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Abstract -

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Oncology. 2015 Apr 29. [Epub ahead of print]

Dose-Dense Neoadjuvant Chemotherapy plus Radical Surgery in Locally Advanced Cervical Cancer: A Phase II Study.

Benedetti Panici P1, Palaia I, Marchetti C, Ruscito I, Fischetti M, Musella A, Di Donato V, Perniola G, Vertechy L, Muzii L.

Author information

Abstract

OBJECTIVE: To assess the efficacy and toxicity profile of dose-dense cisplatin-based neoadjuvant chemotherapy (NACT) followed by radical surgery in patients affected by locally advanced cervical cancer.

METHODS: Patients affected by carcinoma of the uterine cervix FIGO (International Federation of Obstetrics and Gynecology) stage IB2-IIIB were enrolled into the study. The treatment schedule consisted of 5 cycles of intravenous paclitaxel 60 mg/m² plus cisplatin 60 mg/m² every 10 days; patients were then submitted to radical hysterectomy and pelvic lymphadenectomy.

RE SULTS: From January 2011 to March 2013, 22 patients were enrolled. Median age was 47 (26-83) years. FIGO stages included 1 IIA, 15 IIB, 1 IIIA, and 5 IIIB. Ninety-one percent of patients completed all the 5 planned cycles of NACT. Three patients experienced allergic reactions to paclitaxel. Grade 3-4 hematological toxicity was observed in 18% of cases. In 3 cases, grade 3-4 extra-hematological adverse and life-threatening events were reported (1 ototoxicity, 1 transient ischemic attack, and 1 myocardial infarction). No treatment-related death occurred. The operability rate was 86.4%. The overall response rate was 52.6%: 5 patients (26.3%) experienced clinical complete response, and 5 (26.3%) showed a clinical partial response. Stable disease was observed in 47.4% of patients, with no progressive disease recorded. Pathological response was observed in 57.9% of cases. Six out of 19 (31.6%) patients were submitted to adjuvant treatment.

CONCLUSION: Dose-dense cisplatin-based NACT showed a response rate in approximately half of patients. However, in consideration of the reported extra-hematological toxicity, further studies on and new strategies with dose-dense platinum-based NACT are required to improve outcome in cervical cancer patients. © 2015 S. Karger AG, Basel.

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Oncology, 2015 Apr 29. [Epub ahead of print]

Dose-Dense Neoadjuvant Chemotherapy plus Radical Surgery in Locally Advanced Cervical Cancer: A Phase II Study.

Benedetti Panici P¹, Palaia I, Marchetti C, Ruscito I, Fischetti M, Musella A, Di Donato V, Perniola G, Vertechy L, Muzii L.

Author information

Abstract

OBJECTIVE: To assess the efficacy and toxicity profile of dose-dense cisplatin-based neoadjuvant chemotherapy (NACT) followed by radical surgery in patients affected by locally advanced cervical cancer.

METHODS: Patients affected by carcinoma of the uterine cervix FIGO (International Federation of Obstetrics and Gynecology) stage IB2-IIIB were enrolled into the study. The treatment schedule consisted of 5 cycles of intravenous paclitaxel 60 mg/m² plus cisplatin 60 mg/m² every 10 days; patients were then submitted to radical hysterectomy and pelvic lymphadenectomy.

RE SULTS: From January 2011 to March 2013, 22 patients were enrolled. Median age was 47 (26-83) years. FIGO stages included 1 IIA, 15 IIB, 1 IIIA, and 5 IIIB. Ninety-one percent of patients completed all the 5 planned cycles of NACT. Three patients experienced allergic reactions to paclitaxel. Grade 3-4 hematological toxicity was observed in 18% of cases. In 3 cases, grade 3-4 extra-hematological adverse and life-threatening events were reported (1 ototoxicity, 1 transient ischemic attack, and 1 myocardial infarction). No treatment-related death occurred. The operability rate was 86.4%. The overall response rate was 52.6%: 5 patients (26.3%) experienced clinical complete response, and 5 (26.3%) showed a clinical partial response. Stable disease was observed in 47.4% of patients, with no progressive disease recorded. Pathological response was observed in 57.9% of cases. Six out of 19 (31.6%) patients were submitted to adjuvant treatment.

CONCLUSION: Dose-dense cisplatin-based NACT showed a response rate in approximately half of patients. However, in consideration of the reported extra-hematological toxicity, further studies on and new strategies with dose-dense platinum-based NACT are required to improve outcome in cervical cancer patients. © 2015 S. Karger AG, Basel.

PMID: 25924602 [PubMed - as supplied by publisher]

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