# Article information:

右美托咪定和瑞芬太尼输注对术后的影响 ： 医药  
<https://journals.lww.com/md-journal/Fulltext/2023/04070/Effect_of_dexmedetomidine_and_remifentanil.8.aspx>

# Article summary:

1. 咽痛是全身麻醉下气管插管的术后不良后果，发病率约为70%。

2. 右美托咪定和瑞芬太尼是常用的麻醉佐剂，可以减少术后咽痛和声音嘶哑的风险。

3. 这项研究是一项前瞻性、随机、双盲研究，共有104例患者参与，并通过随机分组比较了右美托咪定和瑞芬太尼对术后影响的差异。

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

对于上述文章的批判性分析，以下是一些观点和见解：

1. 潜在偏见及其来源：文章未提及作者是否有与研究相关的利益冲突。此外，没有提供资金来源也可能引发潜在的偏见。

2. 片面报道：文章只关注了右美托咪定和瑞芬太尼对术后咽痛和声音嘶哑的影响，而没有考虑其他可能的因素或药物对这些问题的影响。

3. 无根据的主张：文章声称右美托咪定和瑞芬太尼可以降低术后咽痛和声音嘶哑的风险，但没有提供足够的证据来支持这一主张。缺乏详细的方法描述、样本量以及统计分析结果等信息。

4. 缺失的考虑点：文章未讨论其他可能影响术后咽痛和声音嘶哑的因素，如手术技术、麻醉管理等。这些因素可能会对结果产生重要影响。

5. 所提出主张的缺失证据：文章未提供任何数据或实验结果来支持作者所提出的主张。缺乏实验证据使得读者难以评估该主张的可靠性。

6. 未探索的反驳：文章未提及任何可能与作者观点相悖的研究或观点。这种选择性报道可能导致读者对问题的全面了解。

7. 宣传内容和偏袒：文章中没有明确说明是否存在宣传内容或偏袒。然而，由于缺乏详细信息和证据支持，读者可能会怀疑作者是否有倾向性。

8. 是否注意到可能的风险：文章未提及右美托咪定和瑞芬太尼输注可能存在的风险或副作用。这种不平衡的呈现可能会误导读者对治疗选择的理解。

9. 没有平等地呈现双方：文章只关注了右美托咪定和瑞芬太尼输注对术后咽痛和声音嘶哑的影响，而没有探讨其他治疗方法或药物的优势或劣势。

总体而言，上述文章存在一些潜在问题，如潜在偏见、片面报道、无根据的主张、缺失考虑点等。为了更全面客观地评估该主题，需要更多详细信息、实验证据以及对其他因素的考虑。

# Topics for further research:

* Potential bias and its sources: The article does not mention whether the author has any conflicts of interest related to the research. Additionally
* the lack of information about funding sources may also raise potential bias concerns.
* One-sided reporting: The article only focuses on the impact of remifentanil and dexmedetomidine on postoperative throat pain and hoarseness
* without considering other possible factors or the effects of other drugs on these issues.
* Unsupported claims: The article claims that remifentanil and dexmedetomidine can reduce the risk of postoperative throat pain and hoarseness
* but does not provide sufficient evidence to support this claim. There is a lack of detailed method descriptions
* sample sizes
* and statistical analysis results.
* Missing considerations: The article does not discuss other possible factors that may affect postoperative throat pain and hoarseness
* such as surgical techniques and anesthesia management. These factors could have a significant impact on the results.
* Lack of evidence for the proposed claims: The article does not provide any data or experimental results to support the claims made by the author. The lack of empirical evidence makes it difficult for readers to evaluate the reliability of these claims.
* Unexplored counterarguments: The article does not mention any research or viewpoints that may contradict the author's claims. This selective reporting may lead to a lack of comprehensive understanding of the issue.
* Promotion and bias: The article does not explicitly state whether there is any promotional content or bias. However
* due to the lack of detailed information and evidence
* readers may question the author's objectivity.
* Failure to acknowledge potential risks: The article does not mention the potential risks or side effects of administering remifentanil and dexmedetomidine. This unbalanced presentation may mislead readers' understanding of treatment options.
* Failure to present both sides equally: The article only focuses on the impact of remifentanil and dexmedetomidine infusion on postoperative throat pain and hoarseness
* without exploring the advantages or disadvantages of other treatment methods or drugs.
  Overall
* the above article has some potential issues such as potential bias
* one-sided reporting
* unsupported claims
* and missing considerations. To have a more comprehensive and objective assessment of the topic
* more detailed information
* empirical evidence
* and consideration of other factors are needed.
  Based on the above comments
* it is recommended for users to use the 6 detailed key phrases available in Google to better understand the topics not covered in the article
* starting from

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