



# پایگاه کارین Cochrane library

# بنیاد همیاری کاکرین Cochrane Collaboration

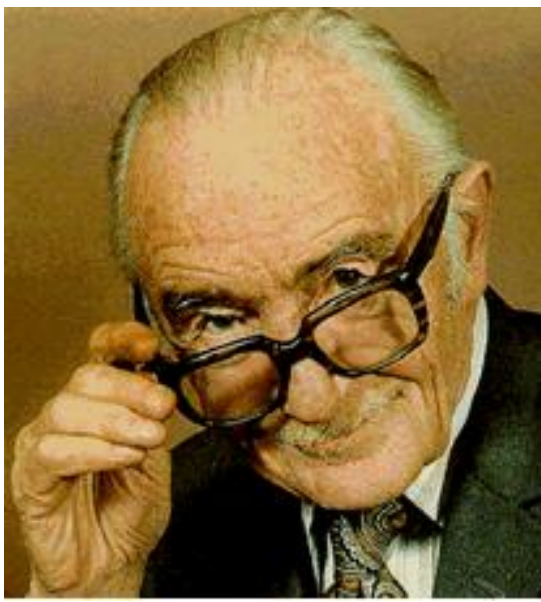
• گروهی بالغ بر ۳۷،۰۰۰ داوطلب از بیش از ۱۲۰ کشور جهان که به بررسی اثرات مداخلات مراقبت‌های بهداشتی در آزمایش پزشکی کارآزمایی بالینی تصادفی می‌پردازند.

هدف:

• فراهم آوری مرورهای سیستماتیک به منظور به روز رسانی و ارتقاء دانش پزشکی

• فراهم آوری وسیع‌ترین مجموعه‌ی مربوط به کارآزمایی‌های بالینی را در جهان فراهم آورده است.

این مجموعه، به عنوان یک موسسه خیریه در انگلستان ثبت شده است.



Professor Archibald Leman Cochrane, (1909 - 1988)



David Lawrence Sackett, (1934 –2015)



Iain Geoffrey Chalmers, (1943- )

## تاریخچه کارین

- ۱۹۷۲: "آرکی کارین" نقد تندی را بر علیه سیستم بهداشتی آن زمان منتشر کرد.
- ۱۹۹۰: گروهی به سرپرستی دیوید ساکت در دانشگاه مک مستر کانادا ایده جمع آوری و بکارگیری بهترین شواهد را مطرح کردند.
- ۱۹۹۳: تحت رهبری این چالمرز و به عنوان پاسخی برای درخواست آرکی کارین برای داشتن مقالاتِ مروری به روز از کارآزمایی های بالینی مربوط به بهداشت و درمان، تاسیس شد.

کارگاه کتابدار بالینی دانشگاه علوم پزشکی سبزوار، بهمن ۱۳۹۵

# کتابخانه کاکرین

- کتابخانه کاکرین، مجموعه ای از پایگاه های اطلاعاتی در زمینه پزشکی و دیگر شاخه های مربوط به بهداشت و درمان می باشد که توسط بنیاد همکاری کاکرین و دیگر سازمان ها ایجاد شده است.
- هسته اصلی آن **Cochrane Reviews** است که پایگاه اطلاعاتی برای مطالعات مروری و متاآنالیزها هست.
- کتابخانه کاکرین یک پایگاه اطلاعاتی مبتنی بر اشتراک (Subscription) می باشد.
- هم اکنون بخشی از سیستم آنلاین وایلی (**Wiley Online Library**) است.
- در بعضی از کشور ها مثل بخش هایی از کانادا، انگلستان، ایرلند، کشور های اسکاندیناوی، نیوزیلند، استرالیا، هند، افریقای جنوبی و لهستان دسترسی به آن رایگان است.
- همچنین تمام کشورها دسترسی رایگان به خلاصه مقالات دو صفحه ای از تمام بخش **Cochrane Reviews** را دارند.

# کتابخانه کاکرین: پایگاه ها

1. Cochrane Database of Systematic Reviews - Cochrane Reviews  
(**CDSR**)

- پایگاه اطلاعاتی مرورهای سیستماتیک

2. Database of Abstracts of Reviews of Effects - Other Reviews  
(**DARE**)

- پایگاه اطلاعاتی چکیده مرورهای اثرات

# کتابخانه کاکرین: پایگاه ها

## 3. Cochrane Central Register of Controlled Trials - Clinical Trials (**CENTRAL**)

• مرکز ثبت مطالعات کارآزمایی بالینی کاکرین

## 4. The Cochrane Methodology Register - Method Studies (**CMR**)

• مرکز ثبت متدولوژی کاکرین

# کتابخانه کاکرین: پایگاه ها

## 5. Health Technology Assessment Database - Technology Assessments (**HTA**)

- پایگاه اطلاعاتی ارزیابی فناوری سلامت

## 6. The NHS Economic Evaluation Database - Economic Evaluations (**EED**)

- پایگاه اطلاعاتی ارزیابی های اقتصادی

## 7. Cochrane Groups

- گروه های کاکرین

Database	Total Records	Year	Impact factor (IF)
<i>Cochrane Database of Systematic Reviews</i> A breakdown of CDSR content is available <a href="#">here</a>	9,668	<b>2015</b>	6.103
Cochrane Central Register of Controlled Trials	992,236	<b>2014</b>	6.035
Cochrane Methodology Register	15,764	<b>2013</b>	5.939
Database of Abstracts of Reviews of Effect	36,795	<b>2012</b>	5.785
Health Technology Assessment Database	16,559	<b>2011</b>	5.912
NHS Economic Evaluation Database	15,015	<b>2010</b>	6.186
About The Cochrane Collaboration	78	<b>2009</b>	5.653
Cochrane Editorials	118	<b>2008</b>	5.182
		<b>2007</b>	4.654

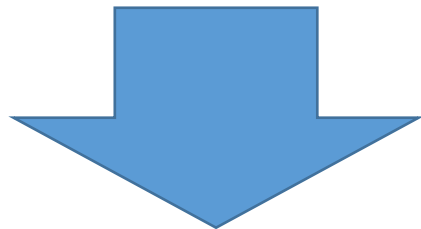


# ضرورت پزشکی مبتنی بر شواهد

1. انفجار اطلاعات پزشکی

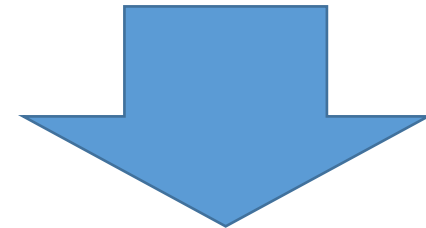
2. زمان کمی که پزشکان به مطالعه می پردازند

3. افزایش حجم بیماران و پیدایش بیماری ها و روش های درمان جدید



وجود چشمگیر خطاهای پزشکی

به روز رسانی اطلاعات افراد بالینی



جلوگیری از خطاهای پزشکی

# خطاهای پزشکی

انجمن پزشکی آمریکا (Institute of medicine) IOM:

- مرگ سالیانه ۹۸-۴۴ هزار بیمار در اثر خطاهای پزشکی بیمارستانها ( تا ۱۹۵ هزار نفر در برخی آمارها )
- سومین تا هشتمین علت مرگ و میر
- آسیب جدی ۵۰۰ هزار نفر در سال
- مرگ ۷۰۰۰ بیمار بعلت دست خط های نامرتب و درهم و برهم در سال
- ۵/۷ میلیون جراحی و درمانهای غیر ضروری در سال انجام می شود.

# انفجار اطلاعات پزشکی

- نیمه عمر دانش پزشکی در برخی علوم مانند ژنتیک و بیوشیمی ۳ تا ۴ سال و در برخی از آنها ۶ تا ۷ سال برآورد می‌شود. بنابراین بطور متوسط پس از گذشت ۵ سال از دوران آموزش دانشگاهی، اگر تمام مطالب هم در ذهن فارغ التحصیلان مانده باشد، باز هم نیمی از آنها قدیمی و غیر مفید خواهد بود.
- مدت زمان دو برابر شدن دانش پزشکی در سال ۱۹۹۱ حدود ۱۹ سال بوده است اما در سال ۲۰۰۱ به ۲۰ ماه رسید.
- کسانی که ۱۰ سال پیش فارغ التحصیل شده اند مشاهده خواهند کرد که ۹۰ درصد از داروها و درمان های موجود در طی همین ۱۰ سال ایجاد شده اند.

# زمان کمی که پزشکان به مطالعه می پردازند

دیده شده که به طور متوسط برای پزشکان به :

❖ ازای هر ۱ مریض بستری ۵ سوال و

❖ به ازای هر ۳ مریض سرپایی ۲ سوال

پیش می آید که پاسخ آن را نمی دانند و اغلب به دنبال یافتن پاسخ سوالات نمی روند.

در مواردی که این سوالات پاسخ داده شده اند :

❖ در ۳۰٪ موارد تصمیم گیری بالینی و

❖ در ۱۰٪ موارد پیامد بیماری

تغییر می کند.

# جستجو در کاکرین

• آیا چای سبز برای کاهش وزن مفید است؟

Title, Abstract, Keywords

Search All Text

Record Title

Author

Abstract

Keywords

Title, Abstract, Keywords

Tables

Publication Type

Source

DOI

Accession Number

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Search Manager

Medical Terms (MeSH)

Browse

"green tea\*\*"

Go

Save

"camellia sinensis"

[Save to Search Manager](#)

Catechin

"epigallocatechin-3-gallate"

Caffeine

Do you want to add more lines?

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(Word variations have been searched)

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[Search](#)[Search Manager](#)[Medical Terms \(MeSH\)](#)[Browse](#)

To search an exact word(s) use quotation marks, e.g. "hospital" finds hospital; hospital (no quotation marks) finds hospital and hospitals; pay finds paid, pays, paying, payed)

[Add to top](#)

#1

"green tea":ti,ab,kw or "camellia sinensis":ti,ab,kw or Catechin:ti,ab,kw or "epigallocatechin-3-gallate" or Caffeine:ti,ab,kw (Word variations have been searched)



3333

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Strategy Name

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Search

Search Manager

Medical Terms (MeSH)

Browse

weight

Select subheadings / qualifiers

Lookup

Clear

- Weight Bearing
- Weight Bearing Exercise Program
- Weight Bearing Strengthening Program
- Weight Change, Body
- Weight Changes, Body
- Weight Gain
- Weight Gains
- Weight Lifting
- Weight Lifting Exercise Program
- Weight Lifting Strengthening Program
- Weight Liftings
- Weight Loss
- Weight Loss Agents
- Weight Loss Diet
- Weight Loss Diets
- Weight Loss Drugs

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Search

Search Manager

Medical Terms (MeSH)

Browse

"Weight Loss"

Select subheadings / qualifiers

Lookup

Clear

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Weight Loss

Select subheadings / qualifiers

Lookup

Clear

[Search Help](#)**Definition****Weight Loss** - Decrease in existing BODY WEIGHT.**Thesaurus matches****Exact Term Match****Weight Loss**

Synonyms: Weight Losses.

**Phrase Matches****Weight Loss**

Synonyms: Loss, Weight; Losses, Weight; Weight Losses; Weight Reduction; Reduction, Weight; Reductions, Weight; Weight Reductions.

**Diet, Reducing**

Synonyms: Weight Reduction Diet; Diet, Weight Reduction; Diets, Weight Reduction; Weight Reduction Diets; Weight Loss Diet; Diet, Weight Loss; Diets, Weight Loss; Weight Loss Diets.

**MeSH trees**MeSH term - **Weight Loss**

- Explode all trees  
 Single MeSH term (unexploded)  
 Explode selected trees

**Select**

Use the checkbox next to each tree to explode selected trees

 **Tree Number 1**

## Pathological Conditions, Signs and Symptoms [+4]

## Signs and Symptoms [+36]

## Body Weight [+5]

## Body Weight Changes [+2]

## Weight Gain

## Weight Loss [+1]

## Emaciation [+1]

 **Tree Number 2****Search results**

There are **4352** results for your search on

- MeSH descriptor: [Weight Loss]
- this term only

**Save search**[Add to Search Manager](#)

Cochrane Reviews	35
Other Reviews	305
Trials	3892
Methods Studies	0
Technology Assessments	61
Economic Evaluations	59
Cochrane Groups	0

**View Results**

Body Weight

Select subheadings / qualifiers

Lookup

Clear

[Search Help](#)**Definition****Body Weight** - The mass or quantity of heaviness of an individual. It is expressed by units of pounds or kilograms.**Thesaurus matches****Exact Term Match****Body Weight****Phrase Matches****Body Weight Maintenance**

Synonyms: Body Weight Maintenances; Maintenance, Body Weight; Maintenances, Body Weight; Weight Maintenance, Body; Weight Maintenances, Body.

**Body Weight**

Synonyms: Body Weights; Weight, Body; Weights, Body.

**Body Weight Changes**

Synonyms: Body Weight Change; Change, Body Weight; Changes, Body Weight; Weight Change, Body; Weight Changes, Body.

**MeSH trees**MeSH term - **Body Weight**

- Explode all trees  
 Single MeSH term (unexploded)  
 Explode selected trees

**Select**

Use the checkbox next to each tree to explode selected trees

 **Tree Number 1**

## Pathological Conditions, Signs and Symptoms [+4]

## Signs and Symptoms [+36]

Asthenia

Body Temperature Changes [+2]

Body Weight [+5]

Birth Weight [+1]

Body Weight Changes [+2]

Thinness

Fetal Weight

Overweight [+11]

**Search results**There are **6810** results for your search on

- MeSH descriptor: [Body Weight]
- this term only

**Save search**[Add to Search Manager](#)

Cochrane Reviews	24
Other Reviews	153
Trials	6588
Methods Studies	0
Technology Assessments	12
Economic Evaluations	33
Cochrane Groups	0

**View Results**



green tea

To search an exact word(s) use quotation

Add to top

- + #1

- + #2

- + #3

- + #4

- Edit + #5

- Edit + #6

## Search limits

By default, your search will be of all Cochrane databases, all document statuses, for all years, unless you change these limits with the panel below.

## Database

- Cochrane Reviews
- All
- Review
- Protocol
- Other Reviews
- Trials
- Methods Studies
- Technology Assessments
- Economic Evaluations
- Cochrane Groups

## Status

Limit search to the following:

- New (all products)

For Cochrane Reviews only

- New Search
- Conclusions Changed
- Major Change
- Commented
- Withdrawn

## Cochrane Review Group

Choose review group

## Dates

## Publication Year (available for all databases)

Year (YYYY) the article was originally published

\*\*For Cochrane Reviews, this is the year of the last update

- All Years
- Between  and

Or

## Cochrane Library Online Publication Date

Date the article was added (or last updated) on the Cochrane Library

\*\*Available for Cochrane Reviews only

- All Dates
- In the last
- Between   and

Apply

Clear

ed)

3394

4449

1

6925

10876

1

Clear Strategy

[Search Help](#) Highlight orphan lines

Save existing strategy

▼ Strategy Library (1)

Name

▼ Last saved

Alerts

- 1 green tea

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31/01/2017 09:07



Issue **updated daily** throughout month

There is **1** result from **9713** records for your search on **#6 - #1 and #5** in **Cochrane Reviews** for strategy: **green tea**

Sort by Relevance: high to low

Select all | Export all | Export selected

-  **Green tea** for weight loss and weight maintenance in overweight or obese adults  
Tannis M Jurgens , Anne Marie Whelan , Lara Killian , Steve Doucette , Sara Kirk and Elizabeth Foy  
Online Publication Date: December 2012

Review

All Results (1)

- Cochrane Reviews (1)
  - Review
  - Other Reviews (0)
  - Trials (0)
  - Methods Studies (0)
  - Technology Assessments (0)
  - Economic Evaluations (0)
  - Cochrane Groups (0)

- All
- Current Issue

- Me** Methodology
- Dx** Diagnostic
- Ov** Overview
- Pg** Prognosis
- Qu** Qualitative
- Cc** Conclusions changed
- Ns** New search
- Mc** Major change
- Up** Update
- Wd** Withdrawn
- Cm** Comment

### Choose your export options

Export type: PC

File type: Citation Only

- Citation Only
- Citation And Abstract

Relevance: high to low

Relevance: high to low

Relevance: low to high

Alphabetical

Date

Go to old article view



PDF



Info



References



Figures



Tables

Cochrane Database of Systematic Reviews

# Green tea for weight loss and weight maintenance in overweight or obese adults

Review

Intervention

Tannis M Jurgens , Anne Marie Whelan, Lara Killian, Steve Doucette, Sara Kirk, Elizabeth Foy

Corresponding author

Dalhousie University, College of Pharmacy, Halifax, NS, Canada

 Tannis M Jurgens, College of Pharmacy, Dalhousie University, 5968 College Street, Halifax, NS, B3H 4R2, Canada. [tannis.jurgens@dal.ca](mailto:tannis.jurgens@dal.ca).

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[Objectives](#)

[Methods](#)

[Results](#)

[Discussion](#)

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[Data and analyses](#)

[Appendices](#)

[Contributions of authors](#)

[Declarations of interest](#)

 [English](#) | [French](#) | [Japanese](#)

## BACKGROUND

Preparations of green tea are used as aids in weight loss and weight maintenance.

Catechins and caffeine, both contained in green tea, are each believed to have a role in



# Green tea for weight loss and weight maintenance in overweight or obese adults

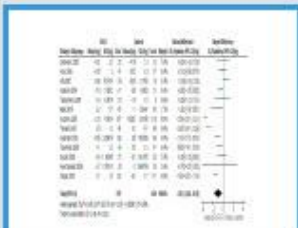
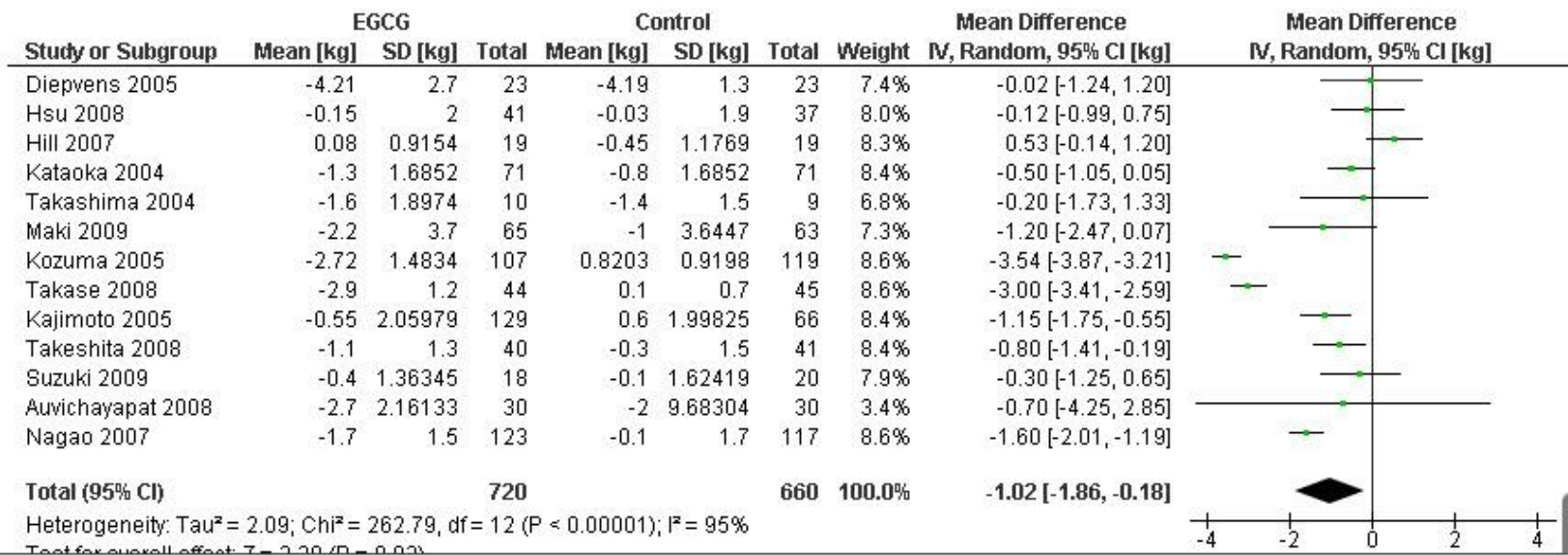


Figure 5



Figure 6



• کاهش وزن و چای سبز؛

دلایل علمی کافی در رد یا تأیید اثر چای سبز بر کاهش وزن وجود ندارد.<sup>[۱]</sup>

منابع [ویرایش]

Jurgens TM, Whelan AM, Killian L, Doucette S, Kirk S, Foy E. "Article" (PDF). *Green tea for weight loss and weight maintenance in overweight or obese adults* (Cochrane Database Syst Rev). Rev) 12 (2012): CD008650. doi:10.1002/14651858.CD008650.pub2

Search

Search Manager

Medical Terms (MeSH)

Browse

## green tea

To search an exact word(s) use quotation marks, e.g. "hospital" finds hospital; hospital (no quotation marks) finds hospital and hospitals; pay finds paid, pays, paying, payed)

[Add to top](#)[View fewer lines](#)

<input type="radio"/>	<input type="radio"/>	#1	"green tea":ti,ab,kw or "camellia sinensis":ti,ab,kw or Catechin:ti,ab,kw or "epigallocatechin-3-gallate" or Caffeine:ti,ab,kw (Word variations have been searched)	<input type="radio"/>	<input type="text" value="3394"/>	
<input type="radio"/>	<input type="radio"/>	#2	MeSH descriptor: [Weight Loss] this term only	<input type="radio"/>	<input type="text" value="4449"/>	
<input type="radio"/>	<input type="radio"/>	#3	MeSH descriptor: [Body Weight Changes] this term only	<input type="radio"/>	<input type="text" value="1"/>	
<input type="radio"/>	<input type="radio"/>	#4	MeSH descriptor: [Body Weight] this term only	<input type="radio"/>	<input type="text" value="6925"/>	
<input type="radio"/>	<input type="radio"/>	<input type="button" value="Edit"/>	#5	<input type="text" value="#2 or #3 or #4"/>	<input type="radio"/>	<input type="text" value="10876"/>
<input type="radio"/>	<input type="radio"/>	#6	<input type="text" value="#1 and #5"/> in Trials	<input type="radio"/>	<input type="text" value="88"/>	

[Search Help](#) Highlight orphan lines

Save existing strategy

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All Results (88)

- Cochrane Reviews (0)
  - All
  - Review
  - Protocol
- Other Reviews (0)
- Trials (88)
- Methods Studies (0)
- Technology Assessments (0)
- Economic Evaluations (0)
- Cochrane Groups (0)

- All
- Current Issue

- Me** Methodology
- Dx** Diagnostic
- Ov** Overview
- Pg** Prognosis
- Qu** Qualitative
- Cc** Conclusions changed
- Ns** New search
- Mc** Major change
- Up** Update
- Wd** Withdrawn
- Cm** Comment

## Cochrane Central Register of Controlled Trials : Issue 11 of 12, November 2016

There are **88** results from **992236** records for your search on **#6 - #1 and #5** in **Trials** for strategy: **green tea**

Pages **1 - 25** | **26 - 50** | **51 - 75** | **76 - 88**

Sort by Relevance: high to low

Select all | ~~Export all~~ | ~~Export selected~~

- Green Tea** Extract and Catechol-O-Methyltransferase Genotype Modify Fasting Serum Insulin and Plasma Adiponectin Concentrations in a Randomized Controlled Trial of Overweight and Obese Postmenopausal Women.  
Dostal AM , Samavat H , Espejo L , Arikawa AY , Stendell-Hollis NR and Kurzer MS  
The Journal of nutrition, 2016, 146(1), 38  
Publication Year: 2016

- Green tea catechin** plus **caffeine** supplementation to a high-protein diet has no additional effect on body weight maintenance after weight loss.  
Hursel R and Westerterp-Plantenga MS  
The American journal of clinical nutrition, 2009, 89(3), 822  
Publication Year: 2009

- The effects of **epigallocatechin-3-gallate** on thermogenesis and fat oxidation in obese men: a pilot study.  
Boschmann M and Thielecke F  
Journal of the American College of Nutrition, 2007, 26(4), 389S  
Publication Year: 2007

- Green tea** supplementation affects body weight, lipids, and lipid peroxidation in obese subjects with metabolic syndrome.  
Basu A , Sanchez K , Leyva MJ , Wu M , Betts NM , Aston CE and Lyons TJ  
Journal of the American College of Nutrition, 2010, 29(1), 31  
Publication Year: 2010

- Effects of **green tea** on weight maintenance after body-weight loss.

کارگاه کتابدار بالینی دانشگاه علوم پزشکی سبزوار بهمن ۱۳۹۵

The British journal of nutrition, 2004, 91(2), 431

Title	Green Tea Extract and Catechol-O-Methyltransferase Genotype Modify Fasting Serum Insulin and Plasma Adiponectin Concentrations in a Randomized Controlled Trial of Overweight and Obese Postmenopausal Women. <a href="#">Links</a> <a href="#">Export</a> Central Citation
Author(s)	Dostal AM, Samavat H, Espejo L, Arikawa AY, Stendell-Hollis NR, Kurzer MS
Source	The Journal of nutrition
Date of Publication	2016 Jan
Volume	146
Issue	1
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Publisher Name	American Society for Nutrition
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Abstract	<p>BACKGROUND: Green tea consumption has been associated with favorable changes in body weight and obesity-related hormones, although it is not known whether these changes result from green tea polyphenols or caffeine.</p> <p>OBJECTIVE: We examined the impact of decaffeinated green tea extract (GTE) containing 843 mg of (-)-epigallocatechin-3-gallate on anthropometric variables, obesity-associated hormones, and glucose homeostasis.</p> <p>METHODS: The Minnesota Green Tea Trial was a 12-mo randomized, double-blind, placebo-controlled clinical trial of 937 healthy postmenopausal women assigned to either decaffeinated GTE (1315 mg total catechins/d) or a placebo, stratified by catechol-O-methyltransferase (COMT) genotype. This study was conducted in a subset of 237 overweight and obese participants [body mass index (BMI) <math>\geq 25</math> kg/m<sup>2</sup>].</p> <p>RESULTS: No changes in energy intake, body weight, BMI, or waist circumference (WC) were observed over 12 mo in women taking GTE (n = 117) or placebo (n = 120). No differences were seen in circulating leptin, ghrelin, adiponectin, or glucose concentrations at month 12. Participants randomly assigned to GTE with baseline insulin <math>\geq 10</math> <math>\mu</math>U/mL (n = 23) had a decrease in fasting serum insulin from baseline to month 12 (-1.43 <math>\pm</math> 0.59 <math>\mu</math>U/mL), whereas those randomly assigned to placebo with baseline insulin <math>\geq 10</math> <math>\mu</math>U/mL (n = 19) had an increase in insulin over 12 mo (0.55 <math>\pm</math> 0.64 <math>\mu</math>U/mL, P &lt; 0.01). Participants with the homozygous high-activity (G/G) form of COMT had significantly lower adiponectin (5.97 <math>\pm</math> 0.50 compared with 7.58 <math>\pm</math> 0.53 <math>\mu</math>g/mL, P = 0.03) and greater insulin concentrations (7.63 <math>\pm</math> 0.53 compared with 6.18 <math>\pm</math> 0.36 <math>\mu</math>U/mL, P = 0.02) at month 12 compared with those with the low-activity (A/A) genotype, regardless of treatment group.</p> <p>CONCLUSIONS: Decaffeinated GTE was not associated with reductions in body weight, BMI, or WC and did not alter energy intake or mean hormone concentrations in healthy postmenopausal women over 12 mo. GTE decreased fasting insulin concentrations in those with elevated baseline fasting concentrations. The high-activity form of the COMT enzyme may be associated with elevations in insulin and a reduction in adiponectin concentrations over time. This trial was registered at <a href="http://www.clinicaltrials.gov">http://www.clinicaltrials.gov</a> as NCT00917735.</p>
Medical Subject Headings (MeSH)	<p>Adiponectin [*blood]; Administration, Oral; Blood Glucose [metabolism]; Body Mass Index; Body Weight; Caffeine [administration &amp; dosage; analysis]; Catechin [administration &amp; dosage; analogs &amp; derivatives]; Catechol O-Methyltransferase [*genetics]; Double-Blind Method; Energy Intake; Fasting; Genotype; Ghrelin [blood]; Insulin [*blood]; Leptin [blood]; Motor Activity; Nutrition Assessment; Obesity [*blood]; Overweight [*blood]; Plant Extracts [administration &amp; dosage]; Polyphenols [administration &amp; dosage]; Postmenopause; Tea [*chemistry]; Waist Circumference</p> <p>MeSH check words Aged; Female; Humans; Middle Aged</p>
EMBASE keywords	adult; aged; anthropometric parameters; article; blood sampling; body mass; body weight; caloric intake; controlled study; *diet restriction; double blind procedure; drug efficacy; drug safety; drug tolerability; female; genotype; glucose homeostasis; human; insulin blood level; major clinical study; middle aged; *obesity/dt [Drug Therapy]; physical activity; postmenopause; protein blood level; randomized controlled trial; risk reduction; serum; side effect/si [Side Effect]; *tea; treatment duration; treatment outcome; waist circumference; waist hip ratio; *adiponectin/ec [Endogenous Compound]; carbohydrate/dt [Drug Therapy]; catechin/dt [Drug Therapy]; *catechol methyltransferase/ec [Endogenous Compound]; epigallocatechin gallate/dt [Drug Therapy]; fat/dt [Drug Therapy]; ghrelin/ec [Endogenous Compound]; glucose/ec [Endogenous Compound]; *green tea extract/ae [Adverse Drug Reaction]; *green tea extract/dt [Drug Therapy]; *green tea extract/po [Oral Drug Administration]; *green tea extract/tr [Clinical Trial]; hormone/ec [Endogenous Compound]; *insulin/ec [Endogenous Compound]; leptin/ec [Endogenous Compound]; placebo; protein/dt [Drug Therapy]
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# Green Tea Extract and Catechol-O-Methyltransferase Genotype Modify Fasting Serum Insulin and Plasma Adiponectin Concentrations in a Randomized Controlled Trial of Overweight and Obese Postmenopausal Women<sup>1,2,3,4</sup>

Allison M Dostal<sup>5</sup>, Hamed Samavat<sup>5</sup>, Luis Espejo<sup>5</sup>, Andrea Y Arikawa<sup>6</sup>, Nicole R Stendell-Hollis<sup>7</sup>, and Mindy S Kurzer<sup>5,\*</sup>

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## Abstract

**Background** Green tea consumption has been associated with favorable changes in body weight and obesity-related hormones, although it is not known

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