

SCI 번역 샘플(의학)

원문 만성 신질환자에서 빈혈에 대한 페기네사타이드(peginesatide)의 효능은 2상 임상시험을 통해 입증되었다. 시약투여 전 12주 동안 투석과 조혈자극제 치료를 모두 안 받은 환자들이 초기 페기네사타이드 용량(체중대비용량, 절대용량)과 투여경로(정맥주사, 피하주사), 투여빈도(2주 1회, 4주 1회)에 따라 10군으로 순차적으로 배정되었다. 전체 환자 중에서는 96%의 환자에서 헤모글로빈 반응이 나타났다. 헤모글로빈의 증가에서는 용량반응관계가 보였다. 피하주사나 정맥주사를 유사한 용량으로 투여했을 경우 두 환자군에서 비슷한 수준의 헤모글로빈 반응이 나타났다. 헤모글로빈의 빠른 상승과 1 g/dL 이상의 헤모글로빈 변동은 4주 1회 투여하는 환자보다 2주 1회 투여하는 환자에서 더 많이 일어나는 경향이 있었다. 본 연구는 비투석 만성 신질환자에서 4주 1회 페기네사타이드를 투여하는 것이 헤모글로빈 수치를 증가시키거나 유지하는 데 효과적이라는 것을 처음으로 입증했다는 점에서 의미가 있다. 에포에틴 알파(epoetin alfa) 치료 받고 있는 투석 환자는 성공적으로 4주 1회의 페기네사타이드 치료로 바꿀 수 있다는 것이 3상 임상시험을 통해 밝혀졌다.

Reference: Source: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3377433/>



에디티지 6단계 번역 프로세스 중 1, 2단계는 고객님의 학문 분야에 맞는 학술 전문 번역가가 1차 원문 번역을 진행한 후 번역 리뷰에 의한 번역본 검토까지 2중 번역으로 철저하게 원문과 대조하여 작업합니다.

원문번역 The efficacy of peginesatide in the treatment of anemia in patients with CKD is proven in a Phase 2 clinical trial. Patients who had received neither dialysis nor an erythropoiesis-stimulating agent in the 12 weeks prior to the administration of the test drug were sequentially assigned to one of ten groups according to initial dose of peginesatide (weight-based vs. fixed dose), administration route (intravenous vs. subcutaneous injection), and frequency (once every-2-week vs. every-4-week dosing). In all patients, 96% showed a hemoglobin (Hb) response, and Hb increase showed a dose-response relationship. When similar dose was given by intravenous or subcutaneous injection, both patient groups showed a similar level of Hb response. There was a tendency for the patients who received once every-4-week dosing to show more rapid Hb elevation and fluctuation in Hb over 1 g/dL than in patients who received once every-2-week dosing. The significance of the present study is that it was the first study to prove that once every-4-week dosing of peginesatide is more effective in increasing or maintaining Hb levels in non-dialysis CKD patients. It was shown in a Phase 3 clinical trial that dialysis patients being treated with epoetin alfa can successfully transition to once every-4-week dosing of peginesatide.

번역본 검토 The efficacy of peginesatide in the treatment of anemia in patients with ~~chronic kidney disease (CKD-#)~~ ~~has been~~ proven in a Phase 2 clinical trial. Patients who had received neither dialysis nor an erythropoiesis-stimulating agent in the 12 weeks prior to the ~~administration~~ of the test drug were sequentially assigned to one of ten groups according to initial dose of peginesatide (weight-based vs. fixed dose), administration route (intravenous vs. subcutaneous injection), and administration frequency (once every-2-week vs. every-4-week dosing). ~~#Among~~ all patients, 96% showed a hemoglobin (Hb) response, and ~~the~~ increase ~~in Hb~~ showed a dose-response relationship. When similar dose was ~~given administered~~ by intravenous or subcutaneous injection, both patient groups showed a similar level of Hb response. There was a tendency for the patients who received once every-4-week dosing to show more rapid Hb elevation and fluctuation in Hb over 1 g/dL than in patients who received once every-2-week dosing. The significance of the present study is that it was the first study to prove that once every-4-week dosing of peginesatide is more effective in increasing or maintaining Hb levels in non-dialysis CKD patients. It was shown in a Phase 3 clinical trial that dialysis patients being treated with epoetin alfa can successfully transition to once every-4-week dosing of peginesatide.



SCI 번역

에디티지 6단계 번역 프로세스 중 3,4,5,6단계는 고객님의 번역본 검토 후, 고객님의 학문 분야에 맞는 석박사 원어민 에디터 및 리뷰어가 저널에서 요구하는 수준의 영문 원고로 맞추어 드립니다. 일반 교정의 경우 영문에 한하여 재교정 시 60% 할인이 제공 됩니다.

일반교정 ~~A Phase 2 clinical trial showed that the efficacy of~~ peginesatide ~~was efficacious in the treatingment of~~ anemia in patients with chronic kidney disease (CKD) ~~has been proven in a Phase 2 clinical trial~~. Patients who ~~had were not received neither on~~ dialysis ~~nor or received~~ an erythropoiesis-stimulating agent in the 12 weeks prior to the administration of the test drug were sequentially assigned to one of ten ~~groups cohorts~~ according to ~~the~~ initial dose of peginesatide (weight-based vs. fixed dose), administration route (intravenous vs. subcutaneous injection), and administration frequency (~~once~~ every-2-week vs. every-4-week dosing). Among all patients, 96% showed a hemoglobin (Hb) response, and ~~the increase in Hb showed an evident~~ dose-response relationship ~~was observed~~. When ~~similar the~~ doses was administered by intravenous ~~or and~~ subcutaneous injections ~~were similar, both the patient groups cohorts~~ showed a similar level of Hb response. There was a tendency for the patients who received ~~once~~ every-4-week dosing to show more rapid Hb elevation and fluctuation in Hb ~~of~~ over 1 g/dL than in patients who received ~~once~~ every-2-week dosing. The significance of the present study is that it ~~was~~ the first study to prove that ~~once~~ every-4-week dosing of peginesatide is more effective in increasing or maintaining Hb levels in non-dialysis CKD patients. It was shown in a Phase 3 clinical trial that dialysis patients being treated with epoetin alfa can successfully transition to ~~once~~ every-4-week dosing of peginesatide.

최종검토 A Phase 2 clinical trial showed that peginesatide was efficacious in treating anemia in patients with chronic kidney disease (CKD). Patients who were not on dialysis or received an erythropoiesis-stimulating agent in the 12 weeks prior to the administration of the test drug were sequentially assigned to one of ten cohorts according to the initial dose of peginesatide (weight-based vs. fixed dose), administration route (intravenous vs. subcutaneous injection), and administration frequency (every-2-week vs. every-4-week dosing). Among all patients, 96% showed a hemoglobin (Hb) response, and an evident dose-response relationship was observed. When the doses administered by intravenous and subcutaneous injections were similar, the cohorts showed a similar level of Hb response. There was a tendency for the patients who received every-4-week dosing to show more rapid Hb elevation and fluctuation in Hb of over 1 g/dL than in patients who received every-2-week dosing. The significance of the present study is that it is the first study to prove that every-4-week dosing of peginesatide is more effective in increasing or maintaining Hb levels in non-dialysis CKD patients. It was shown in a Phase 3 clinical trial that dialysis patients being treated with epoetin alfa can successfully transition to every-4-week dosing of peginesatide.