SCI 프리미엄번역 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 성공적으로4주 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 리뷰어에 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 ~~is~~) 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). ~~In~~Among all patients, 96% showed a hemoglobin (Hb) response, and ~~Hb~~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 프리미엄 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. 프리미엄 교정에서는 논리의 흐름 및 기승전결의 구조까지 점검되며 영문에 한하여 무료 재교정 범위에 충족하는 경우 365일 무료 재교정이 제공됩니다.

프리미엄교정 This ~~e~~ study aimed to test the efficacy of peginesatide in ~~the~~ treat~~ingment of~~ anemia in patients with chronic kidney disease (CKD) ~~has been proven in~~ by using a Phase 2 clinical trial. Our study population consisted of ~~P~~patients who ~~had~~ were not ~~received neither~~ on dialysis ~~nor~~ or received an erythropoiesis-stimulating agent in the 12 weeks prior to ~~the~~ administer~~ingration of~~ the test drug. ~~were~~ The population was divided into~~sequentially assigned to one of~~ ten ~~groups~~ cohorts ~~according to~~ that differed in 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); each patient was sequentially assigned to a cohort. Among all patients, 96% showed a hemoglobin (Hb) response, and ~~the increase in Hb showed~~ an evident dose-response relationship was observed. The Hb responses were similar ~~W~~when ~~similar~~ the doses ~~was~~ administered by intravenous ~~or~~ and subcutaneous injections; were similar ~~both patient groups showed a similar level of Hb response~~. ~~There was a tendency for t~~The patients who received ~~once~~ every-4-week dosing tended to show more rapid Hb elevation and fluctuation in Hb of over 1 g/dL than in the patients who received once every-2-week dosing. To the best of our knowledge, ~~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 not undergoing dialysis. ~~It was shown in a~~A Phase 3 clinical trial showed that dialysis patients being treated with epoetin alfa can successfully transition to ~~once~~ every-4-week dosing of peginesatide.

최종검토 This study aimed to test the efficacy of peginesatide in treating anemia in patients with chronic kidney disease (CKD) by using a Phase 2 clinical trial. Our study population consisted of patients who were not on dialysis or received an erythropoiesis-stimulating agent in the 12 weeks prior to administering the test drug. The population was divided into ten cohorts that differed in 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); each patient was sequentially assigned to a cohort. Among all patients, 96% showed a hemoglobin (Hb) response, and an evident dose-response relationship was observed. The Hb responses were similar when the doses administered by intravenous and subcutaneous injections were similar. The patients who received every-4-week dosing tended to show more rapid Hb elevation and fluctuation in Hb of over 1 g/dL than the patients who received every-2-week dosing. To the best of our knowledge, the present study is the first to prove that every-4-week dosing of peginesatide is more effective in increasing or maintaining Hb levels in CKD patients not undergoing dialysis. A Phase 3 clinical trial showed that dialysis patients being treated with epoetin alfa can successfully transition to every-4-week dosing of peginesatide.