



Instituto Nacional de Salud Pública
Centro de Investigación en Salud Poblacional



ESMaestras

**Investigación para mejorar
la salud de la mujer**

Mesa 4: Manejo y Reporte y Hallazgos en Salud

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Health reports

Clinical Assessment (sub-cohort)

Health reports handled directly to participants with all relevant results.

General lab, mammography, ECG, blood pressure, IMT, ABI, etc.

Only scientific value not included in report: PWV, Special biomarkers, etc.

Asked participants to discuss with GP (appointment arranged by our team to Hospital)

In case of urgent case, directly reference to hospitals.

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Health behavior and risk factors (general cohort).

Recognize measurement error based on self report with mail questionnaires.

We do not prepare any report on INDIVIDUAL health behavior.

General recommendation on risk factors in periodic bulletins, webpage and social media.

Other ethical considerations for discussion

Consent for medical records review:

Legal heterogeneity across Health institutions and room for interpretation.

Only within hospital review.

Consent in advance (before the outcome incidence) as potential alternative.

Consent for linkage with administrative of vital statistics data bases:

Mortality, hospital discharges, cancer registries etc. (passive identification of incident cases)

We asked for general consent at baseline.

Especial agreement with Public officers responsible of the databases for its use in research.

Long term biorepository storage and incorporation of new hypothesis:

Asked n consent specifically.

Still some questions about biomarkers that become clinical relevant.

International shipping of samples.