

### Article Analysis 1

Article Citation and Permalink	Article 1	Article 2	Article 3
(APA format)	Kennelly, M. A., Ainscough, K., Lindsay, K. L., O'Sullivan, E., Gibney, E. R., McCarthy, M., Ricardo, S., Giuseppe, D., Orla, M., Thomas, S., Mensud, H., & McAuliffe, F. M. (2018). Pregnancy exercise and nutrition with smartphone application support: a randomized controlled	Ikizler, T. A., Robinson-Cohen, C., Ellis, C., Headley, S. A., Tuttle, K., Wood, R. J., Evans, E. E., Milch, C. M., Moody, K. A., Germain, M., Limkunakul, C., Bian, A., Stewart, T. G., & Himmelfarb, J. (2018). Metabolic effects of diet and exercise in patients with moderate to severe CKD: a	Vargas, S., Romance, R., Petro, J. L., Bonilla, D. A., Galancho, I., Espinar, S., Kreider, R. B., & Benítez-Porres, J. (2018). Efficacy of ketogenic diet on body composition during resistance training in trained men: a randomized controlled trial. <i>Journal of the International Society</i>

	<p>trial. <i>Obstetrics &amp; Gynecology</i>, 131(5), 818-826.</p> <p><a href="https://doi.org/10.1097/AOG.00000000000002582">https://doi.org/10.1097/AOG.00000000000002582</a></p>	<p>randomized clinical trial. <i>Journal of the American Society of Nephrology</i>, 29(1), 250-259.</p> <p><a href="https://doi.org/10.1681/ASN.2017010020">https://doi.org/10.1681/ASN.2017010020</a></p>	<p><i>of Sports Nutrition</i>, 15(1), 31.</p> <p><a href="https://doi.org/10.1186/s12970-018-0236-9">https://doi.org/10.1186/s12970-018-0236-9</a></p>
<b>Point</b>	<b>Description</b>	<b>Description</b>	<b>Description</b>
<b>Broad Topic Area/Title</b>	<p>Observing behavior change in exercise and nutrition among pregnant women using current technology (smartphone application)</p>	<p>Testing the implementation of caloric restriction and aerobic exercise effects on the proinflammatory metabolic milieu in patients with moderate to severe CKD</p>	<p>The efficacy of the ketogenic diet during resistance training and its significance to weight loss</p>

<p><b>Identify Independent and Dependent Variables and the Type of Data for the Variables</b></p>	<p>Independent variable: behavior change intervention (changes in diets and exercises)</p> <p>Specific dietary and exercise advice supported by a tailor-designed smartphone application, and Usual/routine care</p> <p>Dependent Variable: Incidences of gestational diabetes Mellitus</p> <p>Incidences of gestational diabetes</p>	<p>Independent valuable: Diet (caloric restriction) and exercises (aerobic exercises)</p> <p>Caloric restriction and aerobic exercise, Caloric restriction alone, Aerobic exercise alone</p> <p>Usual care</p> <p>Dependent variable: Metabolic effects of diet and exercise:</p> <p>Absolute fat mass</p> <p>Body weight</p> <p>Plasma F<sub>2</sub>-isoprostane concentrations, and</p>	<p>Independent variable: behavior change (diet changes during energy surplus resistance training protocol)</p> <p>Ketogenic diet</p> <p>Resistance training protocol</p> <p>Usual care</p> <p>Dependent variable: Body composition</p> <p>Fat mass</p> <p>Visceral adipose tissue</p> <p>Total body weight</p> <p>Muscle mass</p> <p>Lean body mass</p>
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	mellitus between 28-39 weeks gestation.	Peak oxygen uptake (VO <sub>2 peak</sub> )	
<b>Population of Interest for the Study</b>	Singleton pregnant women with body mass index (BMI) between 25 and 39.9 (overweight and obese women)	Individuals with moderate to severe CKD	The interest population is healthy men with over two years of continuous experience in overload training.
<b>Sample</b>	565 women were recruited for the study 241 in the intervention group 257 in the control group	The study recruited 122 individuals who consented to the study 111 were randomized into the four intervention arms 94 participants completed the study	24 men were recruited in this study KD group n=9 Non-KD group n=10 Control Grou n=5

<b>Sampling Method</b>	A randomized sampling method was utilized for this study to select patients meeting the criteria.	A random sampling method was applied in selecting and placing individuals into the various intervention groups.	A randomized sampling method was utilized for this study to select patients meeting the criteria.
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<p><b>Descriptive Statistics (Mean, Median, Mode; Standard Deviation)</b></p> <p>Identify examples of descriptive statistics in the article.</p>	<p>The mean age of the intervention group was 32.8, with a standard deviation of 4.6</p> <p>The mean age of the control group was 32.1, with an SD of 4.1</p> <p>The mean gestation period for the recruited women was 15.5 weeks</p>	<p>The mean age of the participants was 60, with an SD of 11 years.</p> <p>The Mean baseline cystatin C–based estimate of GFR (eGFR<sub>cysC</sub>) was 41 with an SD of 18.6 mg/ml per 1.73 m</p>	<p>The interest population had a mean age of 30 with an SD of 4.7 years, a mean weight of 76.7 with an SD of 8.2kg, and a mean height of 174.3 with an SD of 19.7cm,</p>
<p><b>Inferential Statistics</b></p> <p>Identify examples of inferential statistics in the article.</p>	<p>The incidence of gestational diabetes mellitus: 37 of 241 (15.4%) in the intervention group and 36 of 257 (14.1%) in the control group (relative risk</p>	<p>In intent-to-treat analyses, the intervention group produced a significant overall decrease in body weight compared to the usual care group (<math>P=0.02</math> versus usual care).</p>	<p>The body weight increased in the KD group (<math>p &lt; 0.05</math>) but to a small size (<math>ES = 0.18</math>). VAT only decreased markedly in the KD group (<math>p &lt; 0.05</math>), showing a</p>

	<p>1.1, 95% CI 0.71–1.66, <math>P=0.71</math>).</p> <p>The study showed that the behavioral intervention (smartphone application health support app) did not reduce the incidence of gestational diabetes mellitus as hypothesized.</p>	<p>In intent-to-treat analyses, the intervention groups F<sub>2</sub>-isoprostane concentrations decreased compared to the usual care group (<math>P=0.01</math>)</p> <p>In intent-to-treat analyses, the intervention and usual care group has no statistically significant difference in peak oxygen uptake (<math>VO_{2\text{ peak}}</math>) (<math>P=0.43</math> for overall treatment effect versus usual care; <math>P=0.56</math> for caloric restriction versus usual diet; <math>P=0.37</math> for exercise versus usual activity)</p>	<p>considered large effect (ES = -0.84); only the KD group showed a significant reduction (<math>p &lt; 0.05</math>), expressing a medium effect (ES = -0.46)</p>
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		<p>40 out of 57 participants reported less than the assigned calorie intake level.</p> <p>"All participants were within 20% of their assigned calorie intake (mean 10% less than assigned level, range, 65%–34%) except one participant (34% above assigned level)"</p>	
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## References

- Kennelly, M. A., Ainscough, K., Lindsay, K. L., O'Sullivan, E., Gibney, E. R., McCarthy, M., Ricardo, S., Giuseppe, D., Orla, M., Thomas, S., Mensud, H., & McAuliffe, F. M. (2018). Pregnancy exercise and nutrition with smartphone application support: a randomized controlled trial. *Obstetrics & Gynecology*, 131(5), 818-826. <https://doi.org/10.1097/AOG.0000000000002582>
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