**MINI SYSTEMATIC REVIEW**

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# 1. Result

The aforementioned "PRISMA flow diagram" visually depicts the screening process. Before explicitly stating the selection procedure by describing the decisions taken throughout the "systematic review" process, it first tallies the total number of "articles" that were identified. The sheer amount of articles is indicated for each level. In this report the developing segment. A typical condition affecting both the "stomach" and "intestines," often known as the "gastrointestinal tract," is "irritable bowel syndrome." Cramping, stomach discomfort, bloating, gas, diarrhoea or constipation, or both, are examples of "symptoms" (Atmojo *et al.* 2020). People must manage "IBS" as a "chronic condition" for an extended period. Gut-directed hypnotherapy, which aims to alleviate "bowel symptoms," is being "researched" by experts. An attachment to "hypnotherapy" in addition to "long-term improvement" surrounding "gastrointestinal symptoms," "anxiety," "depression," "disability," and "quality of life" has been discovered in several "IBS studies."

According to Atmojo *et al.* 2020, “Telemedicine, Cost Effectiveness, and Patients Satisfaction: A Systematic Review”, is the technology objective feasibility with patients remote. Since 1960, "telemedicine" has been used (Batista *et al.* 2019). A practical interconnected "telecommunication" method to provide "patient treatment" together with "medical diagnosis" at a distance was what "telemedicine" set out to achieve. With healthcare costs rising, "telemedicine" is increasingly being looked at as a means to provide "healthcare organisations" to pare down costs. This research sought to investigate the potential for "telemedicine utilisation" to save both patients and the "healthcare system" money. As per the author, the willingness to pay to belong to a "patient's WTP" to the "tele homecare system" believed to "combine monitoring" of vital signs and medical consultation is measured by a study team (Jiménez-Zazo *et al.* 2020). The estimated "WTP" varies based on "analytical methods" and is between $ 288, $ 480 in 2014 and $ 520 per case annually. The user's "WTP" for at-home "telehealth monitoring" has only been estimated in one research that was done in an urban setting. This 2012 research demonstrates WTP as little as $ 109 depending on the patient per year.

Batista *et al.* 2019, “Participation in sports in childhood and Adolescence and physical activity in adulthood: A systematic review", To establish an "association" between "participation in sports" during both adolescence and childhood and "physical activity" in adulthood, the purpose of the investigation would soon "systematically review" the literature. The databases "Medline," "Web of Science," "Scopus," "SPORTDiscus," "LILACS," and "SciELO" were all searched "systematically." The "PRISMA FlowDiagram"'s suggestions were followed throughout the whole procedure (Zamani *et al.* 2019). 29 articles were chosen for study after all the procedure phases. Generally speaking, only three out of the analysed research discovered no connection between "PS in childhood," "adolescence," and "PA in adulthood".

In Jiménez-Zazo *et al.* 2020, "Transtheoretical Model for Physical Activity in Older Adults: Systematic Review", taking into consideration all associational diseases and effective ageing function get assigned in case improving the mental strength balance. The "PRISMA flow diagram" was followed in all phases of the procedure. Eight studies have been cited by the author: One prospective cohort research, six "descriptive cross-sectional studies," together with one based on a "quasi-experimental design" were all included (Chiaffarino *et al.* 2021). Only two studies examined each of the four parts of behaviour change in a separate study, whereas three studies tracked the methods for behaviour modification and the "decisional balance," four assessed the effect of the activity on "self-efficacy", and all of the studies evaluated the stages of modifications for "PA behaviour". Studies assessing "psychological" what will happen, quality of life, and physical outcomes associated with "IBD," as determined by recognised screening instruments, were considered. The following "psychological" outcomes were of particular interest: "rates of depression", "anxiety," before "stress as assessed" based on "validated screening tools" like the Beck Depression Inventory, the Hospital Anxiety and Depression Scale, and the Anxiety and Stress Scale, as well as coping as assessed by the Brief Cope Questionnaire. "IBDQ" or "WHO-QoL" were used to measure quality of life.

As per Chiaffarino *et al.* 2021, "Transtheoretical Model for Physical Activity in Older Adults: Systematic Review", "Healthy ageing" with the practice of "Physical activity" in terms of achieving with older quassia experience for developing and intervals of research. When the "meta-analysed data" on the number of "IBS" cases in women with "endometriosis" were analysed, the overall preferably "(95% CI)", in opposition with a little woman without "endometriosis," was 3.26 not showing "statistically significant heterogeneity" (Tontini et al. 2021). Three studies that examined a higher risk of "IBS according to women" together with previous symptoms of "endometriosis" discovered that those who had the ailment were about twice as likely to have it as those who did not. With no "heterogeneity" between one of the three devotes to study taken into consideration, the comprehensive additionally associated with "IBS in women" on "endometriosis" at the moment of randomization instructions underlying the "meta-analysis" was 3.10. Tontini *et al.* 2021 released the paper "Artificial Intelligence in gastrointestinal endoscopy for inflammatory bowel disease: a systematic review and new horizons", the overview currently goes through all endoscopy and "systemic position".

Method:

The following search phrases were used in a "systematic search" in PubMed and Scopus up to 2 December 2020: "artificial intelligence," "machine learning," "computer-aided," "inflammatory bowel disease," "ulcerative colitis," and "Crohn's disease" (Doroftei *et al.* 2021) Every study that dealt with "human digestive endoscopy" was included. For each chosen record, qualitative analysis and "narrative description" were completed following the "Joanna Briggs Institute" techniques and the "PRISMA statement".

Result:

18 of the "398 identified records" were eventually included. Most of them were "cross-sectional studies" and "two-thirds" of them were published in 2020. No pertinent bias at the study's various levels was reported, however, at this early stage, the possibility of bias in the press across research investigations cannot be ruled out (Alauddin *et al.* 2021). Eleven records discussed "UC," "five with CD," and "both" in one way or another. The "convolutional neural network," "random forest," and "deep neural network" "architecture" were the most common "AI systems" used. For the sake of "automated endoscopic scoring" alongside "real-time prediction" associated with "histological disease," the majority of research concentrated street "capsule endoscopy" measurement in CD (n=5) and on the "AI-assisted" evaluation of "mucosal activity" in UC (n=10).

# 2. Discussion

In this part, the discussion is going to reveal the critical appraisal of those studies and some limitations have been assigned in terms of defining the delusion of designation.

In the “Telemedicine, Cost Effectiveness, and Patients Satisfaction: A Systematic Review” study the limitation has been found for this technological development.

It has been predicted that "telemedicine" will "simultaneously" raise expenses, "quality," in addition "access to health care" (Zhao *et al.* 2022). In areas like "mental health" in addition to "management" throughout "chronic diseases" like "diabetes", "heart failure", before "elder care," over a dozen "systematic reviews" have come to the firm conclusion that "telemedicine" is effective.

**1. Study Design**

Between June 1 and July 20, 2019, numerous papers were scanned through the "PubMed," "MEDLINE," "EMBASE," "CINAHL," and "ScienceDirect" databases as part of "a systematic review." The terms "telemedicine" AND "patient satisfaction," "telemedicine" AND "cost-effectiveness," and "telemedicine" are used.

**2. Inclusion and Exclusion**

Randomised controlled trials, "retrospective," "observational studies," "case studies," and "reviews" are the criteria for publications to be included in this review. Unpublished and non-English "articles" were not included.

**3. Data Extraction**

To find papers that provide significance for reference, investigations at "electronic databases" were filtered. The "data" was afterwards transformed into a structured table, a "PRISMA flowchart" of the "Systematic Review".

In the era of "health insurance", "cost savings" are required to prevent "government" losses devoid of "neglecting patient satisfaction" especially "healing." Considering "telemedicine" prospects to improve the efficiency of costs for therapy and patient happiness is what "researchers" are drawn to doing (Zhao *et al.* 2022). The capacity to pay for one's "patient's WTP" for the "telehomecare system" which "combines monitoring" of the patient's vital signs and medical consultation is measured by a study team.

In finding data there some limitations have been found “Participation in sports in childhood and adolescence and physical activity in adulthood: A systematic review” Female athletes (n=11) competed in three matches over two days to assess reactions to a global relation "netball tournament". Measures of the internal and external loads that are quantified match. This study used "DXA" to examine if elite cyclists had a greater incidence associated with "asymmetries" in the sides of their bodies than "non-cyclists." Found out even when "aBMD" together with "LM asymmetries" vary over a journey "cycling season" was "a secondary" goal (Blettler and Wantzen, 2019). DXA scans were performed on 17 professional cyclists and "21 non-cyclist, healthy controls". "Processes of change" are a way of describing how people change. The phrase "the PC" describes the "strategies" and "techniques" people use to modify or adjust their conduct. The two components of "The PC" are cognitive and behavioral processes, respectively. It appears as though every "PC" may be used similarly notwithstanding the specific "SoC" since the pattern of consumption among "cognitive contrasted with behavioral" "PC across" a specific power accessibility "SoC" does not change with any variation in "PA behavior's." The combined use of psychological behaviour and "cognitive PC" inside "SoC" rises when they cooperate. This concept has been one of the most significant modifiers associated with "TTM-based interventions" to improve "PA behavior's".

As per the study "Transtheoretical Model for Physical Activity in Older Adults: Systematic Review" the limitation has been acquired. Understanding how to integrate as well as the sustainability of exercise behaviour in "older adults" is important since their present measures of "PA participation" are "insufficient compared" with all the "positive effects" associated with their behaviour (Wang *et al.* 2019). Since it provides us with a thorough comprehension of how a new habit is developed, the primary point "TTM" is a useful tool in this process. This "model" has demonstrated to be one of the most effective models utilised to explain the "behaviour change" technique, significantly influencing the promotion of "PA." The main points "SoC" has been used as a predictor of "PA". According to the different "SoC," there were notable differences in the recorded comments about Pr/week, on a daily basis the entire "PA time" frequently "light-lifestyle" "PA time" environments, daily total number of "moderate resulting in vigorous physical activity" periods, and daily step counts. The normative "bouts (10-min)" "MVPA" and "activity energy" expenditure increased with respect to SoC, but the amount of time spent participating in sedentary behaviour somewhat decreased. Furthermore, as we advanced through more complex "SoC," "PA levels" rose and "sedentary behaviour’s time fell."

The results of the current examination encourage the use of "TTM" adhering interventions intended to promote "PA habits" in older adults over the age of sixty. Knowing how to use "TTM" and its constructs as a tool in the process of creating and obtaining "tailored-interventions" to promote "PA behaviours" is encouraged by the findings of this review. To get a more comprehensive, especially "integrated view" of "behavioural change," it is advised to examine the "behavioural model" as its whole. Additionally, additional study is required to comprehend how "PC" is used.

As per the "Artificial Intelligence in gastrointestinal endoscopy for inflammatory bowel disease: a systematic review and new horizons" the limitation is sound must be interpreted but the technology all over lacks in the study (Khan *et al.* 2019). 14 926 citations were found in total during the original database search, and 5847 were still present when duplicates were removed. 5634 publications were eliminated after the title and perhaps the abstract was evaluated because they did not match the criteria for inclusion. To determine eligibility, the full texts of the remaining 213 publications were examined; 73 suitable articles were selected for inclusion in the final analysis. A flow diagram representing the search strategy's findings is displayed following the "PRISMA" guideline. According to the research, "IBS" is linked to "poor quality" living circumstances and decreased social function. Some studies also suggest that it may be linked to "psychological psychiatric" illnesses including "anxiety" and "depression" (Shao *et al.* 2019) There have been reports of significant "psychosocial problems" in 50% to 60% of IBS patients.5,6 According to certain studies, from twenty to forty per cent of "IBS patients" exhibit depressive symptoms.

In affirmative decision illumination, there is a big gap found in the "Transtheoretical Model for Physical Activity in Older Adults: Systematic Review" study paper. This paper is some rolled section in finding research paper study materials.

When the general incidence of "IBS" in women with "endometriosis" was "meta-analysed," the overall OR (95 per cent confidence interval)" was 3.26, yet there was no "statistically significant heterogeneity" (Liu *et al.* 2019). All three studies that looked at how often there was "IBS" in women who had previously received a "diagnosis of endometriosis" found that those with "endometriosis" had a roughly twice higher risk than those without it. The comprehensive OR of experience with "IBS" in women together with "endometriosis" through the hypothesis of random effects of the "meta-analysis" turned out 3.10, suggesting no "heterogeneity" between the three studies taken into account.

From the study authenticity of the research study, the valuation is more important to get into the discussion. Stress management is going to be evaluated by default with systemic review and better implications.

**Stress and Cancer**

"Stress" is a "intrinsic" and "familiar" element of existence that, while exhilarating for some, drains many others. Most definitions of "stress" mention a "internal" or "external" investigate, "disturbance", in addition "stimulus", as well as how that challenge is perceived or how it causes a "physiological" response (Yang and Zhang, 2020). An integrated definition of "stress" classifies it as a set of conditions involving a stimulus (stressor), the human brain's response, together with an acceleration of some of the bodily "physiological fight" or deliberately "flight" systems.

**Chronic Stress in Immune Function**

It is believed that "chronic inflammation" plays a crucial role in the "initiation," "progression," and "metastasis" of tumours through several routes, which might involve raised more "oxidative damage" together with "oxidative stress." DNA mutations, "release of factors" such as "matrix metalloproteinases" that allow "tumour invasion", "angiogenesis-inducing factors," and "metastasis-inducing factors" (Ramsay *et al.* 2019). Studies indicating a higher incidence of cancer in "chronic inflammation" areas provide evidence that "chronic inflammation" causes tumour growth.

**Chronic stress regulation**

However, the results demonstrating short-term stress-induced "enhancement" associated with "anti-tumour immunity" must be carefully understood and confirmed. They contend that "short-term stress" may boost fundamental and "adaptive immunity" in general and "anti-tumour immunity" in particular (Vamanu and Gatea, 2020). The fascinating idea that "exercise/physical activity" has positive benefits in the context of "cancer" is also raised by these data. It's possible that "short-term stress physiology" activation and consequently "adjuvant-like effects" depending on "anti-tumour immunity" are at least partially responsible.

**Stress Management and immune process cancer**

Because modifying "stress" processes may permit "psychological" adjustments to cancer in addition to improved health outcomes, the practicality of the "interventions" that may be recognised as "stress management" are currently explored surrounding "randomised controlled trials" through different phases of the "Cancer continuum". Despite the impressive amount of "psychological interventions" that have been implemented to date, a few research investigations have "experimentally" done so that "SM" has the capacity of having an impact "psychological adaptation" between individuals receiving treatment for illness such as cancer while benefiting within (a) modification inside "stress physiology"; (b) disregardful modifications: furthermore (c) long-term ramifications all over "QoL" and "disease course".

**Physical-based approach with SM**

A receive-surgical group-based "SM" "intervention" was put to the test by "Andersen" et al., who found a substantial decrease overall. mortality rates related to "breast cancer" and a 45% lower chance of "cancer recurrence" after a "median" of 11 years of follow-up (Partheniadis *et al.* 2020). Those gaining the "intervention" in the particular category of "depressed women" tracked beyond this follow-up period had dropped in "immunologic" markers indicative of an active illness. In contrast to controls, "chronic inflammatory conditions".

**Trend Emerging Stress Management Research**

The influence of trimmed "SM" on stress and "immune activity" Knowing whether specific components within these elements "combined" approaches are effective is important because amalgamated approaches, which involve "relaxation training," "CBT", together with "Health Education", are related to improved "psychological innovation," "physiological stress" messages, together with nutrition-positive advantages for "cancer patients" taking in primary treatment. This is important because "interventions" that need 10–12 weeks may not prove to be "feasible" during the "clinical oncology" setting.

**Clinical Consideration and Practical**

More and more evidence points to the possibility that "psychosocial interventions" may "influence psychological resilience", "stress-related biobehavioral phenomena", and even "clinical health outcomes" across "cancer patients". Right now, the emphasis is on the situations and people for whom these "interventions" may be used in "clinical oncology" settings. More than half of the research on the outcomes of those treatments has either been undertaken either "post-surgical patients" or malignant tumours "survivors" who have recently undergone their first treatment and are in the "post-diagnosis cancer" The stages when it boils down to "when" to "intervene" in this area.

In addition to the "when" questions, the "where" questions ask about how the interventions will be delivered (Lu *et al.* 2019). They have emphasised that lengthy "interventions" that call for weekly group participation over several months might not be feasible. Trials are currently being conducted to compare the effectiveness of shorter forms together with remote delivery systems to their more comprehensive and lengthier "in-person versions" in their set of "primary treatments".

**Evaluating the Effectiveness of Stress Management Intervention**

The "optimal methodology" when assessing "interventions" is generally regarded as "randomised control trial" designs, which are based on what is known as the "natural science paradigm". Participants in "RCTs" are randomly assigned to the both control and experimental categories before the "experimental group" is given the intervention. Both groups are evaluated for change in the primary outcome beforehand as well as following the "intervention". When the results of experiments concerning the "experimental group" differ considerably from that in the power supply "control group," "randomization" is employed to account for participant and context effects, leading to the assumption that the "intervention" is to blame.

In addition to assessing individual studies, "meta-analyses" are carried out to provide a "quantitative" overview of "multiple studies" (Venditti, 2019). After taking into account the individual research selected for review, a "meta-analysis" is used to calculate the global impact size. Investigations into the efficacy of of "SMI" are still argued to require "systematic quantitative" in addition to "qualitative" evaluations, as well as "rigorous evaluations" of "SMI" that do not adhere to the "gold standard" concerning "RCTs," due to the significance of "intervention processes" in determining the efficacy or ineffectiveness of a "intervention" and the boundaries associated with "RCTs" surrounding organisational settings.

# 3. Conclusion

Because of this, feelings of stress or melancholy may cause a "stomachache" or other abdominal discomfort. Research suggests that improving one's "psychological health" might also benefit one's "digestive health." It may lessen abdominal pain as well as other "IBS symptoms". In "stress-induced" alterations in "neuro-endocrine-immune" pathways, the link between the brain and the gut and the microbiota-gut-brain axis are impacted, which somewhat "cause symptom flare-ups" or intentionally "exaggeration" in "IBS." Since "IBS" is a "stress-sensitive disorder," its treatment should place a special emphasis on "managing stress" together with the reactions that "stress" triggers. Future generations must view the progress as a more positive and effective resolution. People may identify "stress" products based on activity and time of day, and location with "wearables" like smartwatches and headsets, "AI-enabled therapeutic chatbots," and "virtual reality technology." These "tech advancements" are also beneficial in altering emotions and ideas to lower stress levels. The parts that are included in this book provide a great evaluation of the "state of the art" in "stress research".

Furthermore, they offer a "rich supply" of "emerging concepts" about how "stressors" present themselves in terms of "different mental health" outcomes. This is perhaps more significant. The goal of this study was to look at the possibility of using "telemedicine" to reduce costs for both the healthcare system and the patients. The ideas of the "PRISMA FlowDiagram" were adhered to throughout the whole process. The proposed "PRISMA flow diagram" was adhered to throughout the whole process. Considered were studies evaluating "psychological" results, and aspects of daily life, in addition, to physical outcomes related to "IBD," as evaluated by accepted screening methods. The three studies that looked at the increasing incidence of "IBS through women" in relation to a prior diagnosis of "endometriosis" found that those who had the condition were around twice as likely to obtain it as those who did not. 73 pertinent articles have been picked to be included as part of the study's findings after the whole texts of the 213 publications that were kept under consideration were examined to determine eligibility. The prevalence of "IBS" in women who had a "endometriosis diagnosis" at the time of the research was studied in all three.

It was discovered that those who had been diagnosed with "endometriosis" had a risk that was nearly twice as high as those without it. The intriguing notion that "exercise/physical activity" is beneficial regarding the topic of "cancer" is also brought up by these findings. Possible activation of "short-term stress physiology" Investigations of the efficacy of "SMI" is still said to require "systematic quantitative" together with "qualitative" capitalization. Some authors have chosen to present a compelling "empirical analysis" to show "significant novel methodological" together with "conceptual directions" regarding "stress researchers," whereas others have chosen to focus on an in-depth review of the "research literature" in addition to the "specification" of significant "new theoretical issues". Regardless of the method, these authors offer not only a concise overview of the most important research issues in the area but also a plan for future study in this quickly developing field of mental health.

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