1. **anticoagulation\_and\_stroke** 
   * [Dataset for the study of the effect of anticoagulation in the incidence of stroke and other outcomes in patients with left ventricular thrombus - ScienceDirect](https://www.sciencedirect.com/science/article/pii/S2352340923005693)
   * This dataset focuses on evaluating the effect of anticoagulation duration on stroke incidence in patients with left ventricular thrombus (LVT).
   * The data was collected from transthoracic echocardiogram studies conducted at Hospital Universitario Ramón y Cajal between January 1st, 2014, and December 31st, 2021.
   * The dataset includes both demographic and clinical information, such as treatment choices (Vitamin K antagonists [VKA] or direct oral anticoagulants [DOAC]), duration of treatment, and various health outcomes like stroke, acute myocardial infarction (AMI), bleeding, thrombus resolution, recurrence, and mortality.
   * The dataset includes 98 patients after filtering from 267 initial cases. Key variables include age, sex, cardiovascular risk factors, and treatment details. Data is organized into four main categories:
     + Demographic and Clinical Information (e.g., age, weight, medical history).
     + Diagnosis and Etiology (e.g., AMI, stroke, cardiomyopathy type).
     + Outcomes (e.g., stroke, bleeding, thrombus resolution).
     + Subgroup Analysis (e.g., age groups, ischemic risk, and treatment types).
2. **changes\_in\_pft**

* [Changes in spirometry and pulmonary diffusing capacity in Mexican Hispanics approximately one year after having severe COVID-19: A dataset - ScienceDirect](https://www.sciencedirect.com/science/article/pii/S2352340924009600)
* This dataset examines long-term pulmonary outcomes in patients recovering from severe COVID-19. It was collected from the Long-term follow-up COVID-19 Clinic in Mérida, Mexico, between March and August 2021.
* The dataset includes information on pulmonary function tests (spirometry, diffusing capacity, alveolar volume), morbidity history, and fibrosis scores from CT scans.
* The dataset includes 82 patients who completed both baseline and follow-up pulmonary tests. Key variables include age, sex, comorbidities, and treatment details. The data is organized into four main categories:
  + - Demographic and Clinical Information (e.g. age, sex, BMI, pre-existing risk factors, and other clinical characteristics).
    - Pulmonary Function (e.g. includes z-scores for spirometry (FEV1, FVC, FEV1/FVC ratio), diffusing capacity (DLCO), alveolar volume (VA), and the carbon monoxide transfer coefficient (KCO)).
    - Symptoms (e.g. includes symptom persistence, such as fatigue, shortness of breath, chest pain, and other COVID-19-related symptoms (positive/persistence = 1, absence = 0)).
    - Imaging (e.g. includes high-resolution CT scan fibrosis scores, evaluated using the Goh score, with imaging performed at a median of 38 days after the final pulmonary function test).

1. **gut\_microbiota**
   * [Dataset of establishment of gut microbiota: Molecular analysis of a cohort of 29 preterm Moroccan newborns - ScienceDirect](https://www.sciencedirect.com/science/article/pii/S235234092400101X#refdata001)
   * This dataset explores the establishment of gut microbiota in preterm Moroccan newborns. It was collected as part of a prospective cohort study conducted at the National Reference Center for Neonatology and Nutrition, Rabat, Morocco, between January and September 2021.
   * The study focused on microbiota colonization during the first three weeks of life, with stool samples collected from 29 preterm infants.
   * A total of 203 stool samples were analyzed using real-time PCR to assess the microbial composition, targeting four bacterial phyla: Firmicutes, Bacteroidetes, Actinobacteria, and Proteobacteria.
   * Key variables include:
     + Sociodemographic factors (e.g., maternal age, residence).
     + Obstetrical data (e.g., delivery mode, gestational age).
     + Clinical factors (e.g., infection risk, birth weight).
   * The data includes detailed microbial profiles, as well as clinical observations during the infants’ hospitalization.
   * The dataset is valuable for understanding the factors influencing gut microbiota development in preterm infants and offers insights into the impact of delivery mode, feeding practices, and antibiotic use.
2. **immune\_checkpoint\_inhibitor**
   * [Dataset of a retrospective multicenter cohort study on characteristics of immune checkpoint inhibitor-induced encephalitis and comparison with HSV-1 and anti-LGI1 encephalitis - ScienceDirect](https://www.sciencedirect.com/science/article/pii/S235234092200854X#refdata001)
   * This dataset stems from a multicenter cohort study aimed at investigating immune checkpoint inhibitor (ICI)-induced encephalitis (ICI-iE).
   * The study was conducted across multiple countries, including Germany, Japan, Australia, and the Netherlands, and covers cases from 2015 to 2021.
   * The dataset includes data from 30 cases of ICI-iE.
   * The goal is to better understand the clinical, radiologic, and laboratory characteristics of ICI-iE to improve diagnosis and treatment.
   * Key variables include:
     + Demographics: Patient age, gender, and comorbidities.
     + Tumor type: For patients with ICI-iE, the type of cancer they were treated for is recorded.
     + Immune checkpoint inhibitors: Information on the types of ICIs used and the presence of any additional immune-related adverse events (irAEs).
     + Symptoms: Neurological symptoms such as impaired consciousness, memory deficits, confusion, seizures, and behavioral changes.
     + Laboratory results: Blood and cerebrospinal fluid (CSF) analysis, including white blood cell count, C-reactive protein (CRP), and procalcitonin (PCT).
     + Imaging findings: Results from brain MRI and EEG to aid in the diagnosis.
     + Outcome: Patients’ clinical outcomes, classified as full recovery, recovery with sequelae, ongoing symptoms, or death.
3. **respiratory\_infections**
   * [Dataset of acute respiratory infections: Epidemiological and etiological data from a cohort of 801 Moroccan children - ScienceDirect](https://www.sciencedirect.com/science/article/pii/S2352340924004268?via%3Dihub)
   * The dataset on acute respiratory infections in Moroccan children provides valuable insights into the epidemiology, clinical presentation, and pathogen profiles of children hospitalized with severe pneumonia.
   * Collected from 801 children at the Children’s Hospital of Rabat, this data is significant for understanding respiratory infections in low- and middle-income countries, where such diseases contribute substantially to childhood morbidity and mortality.
   * The study utilized a combination of clinical evaluations, laboratory tests (hemoculture, bacterial culture, and multiplex RT-PCR), and radiological data to comprehensively diagnose and monitor the patients.
   * Key variables in the dataset include:
     + Epidemiological Data: Information on age, gender, residence, vaccination status, and environmental factors (e.g., exposure to smoke or overcrowded living conditions).
     + Clinical Data: Symptoms at presentation, such as cough, difficulty breathing, and fever. Also includes clinical assessments like respiratory rate and chest induration.
     + Biological Data: Laboratory results from blood tests, hemocultures, and PCR for pathogen detection.
     + Radiological Data: Chest X-ray findings, interpreted according to WHO guidelines, focusing on the presence of consolidation or pleural effusion, which are indicators of pneumonia.
     + Etiological Data: Pathogen identification from nasopharyngeal aspirate and blood samples, which includes viruses like rhinovirus, RSV, and adenovirus, and bacteria such as Bordetella pertussis and Mycoplasma pneumoniae.