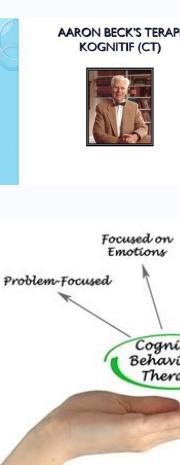


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Cognitive Behavior Therapy

Developed by Dr. Aaron T. Beck. Cognitive Therapy (CT), or Cognitive Behavior Therapy (CBT), is a form of psychotherapy in which the therapist and the client work together as a team to identify and solve problems. Therapists use the Cognitive Model to help clients overcome their difficulties by changing their thinking, behavior, and emotional responses. Cognitive therapy has been found to be effective in more than 1000 outcome studies for a myriad of psychiatric disorders, including depression, anxiety disorders, eating disorders, and substance abuse, among others, and it is currently being tested for personality disorders. It has also been demonstrated to be effective as an adjunctive treatment to medication for serious mental disorders such as bipolar disorder and schizophrenia. Cognitive therapy has been extended to and studied for adolescents and children, couples, and families. Its efficacy has also been established in the treatment of certain medical disorders, such as irritable bowel syndrome, chronic fatigue syndrome, hypertension, fibromyalgia, post-myocardial infarction depression, noncardiac chest pain, cancer, diabetes, migraine, and other chronic pain disorders.

Cognitive Therapy (CT), or Cognitive Behavior Therapy (CBT) was pioneered by **Dr. Aaron T. Beck** in the 1960s, while he was a psychiatrist at the University of Pennsylvania. Having studied and practiced psychoanalysis, Dr. Beck designed and carried out several experiments to test psychoanalytic concepts of depression. Fully expecting the research would validate these fundamental concepts, he was surprised to find the opposite.

A new concept of depression: automatic thoughts

As a result of his findings, Dr. Beck began to look for other ways of conceptualizing depression. He found that depressed patients experienced streams of negative thoughts that seemed to arise spontaneously. He called these thoughts "automatic thoughts." He found that the patients' automatic thoughts fell into three categories. The patients had negative ideas about themselves, the world and/or the future.

A new clinical approach

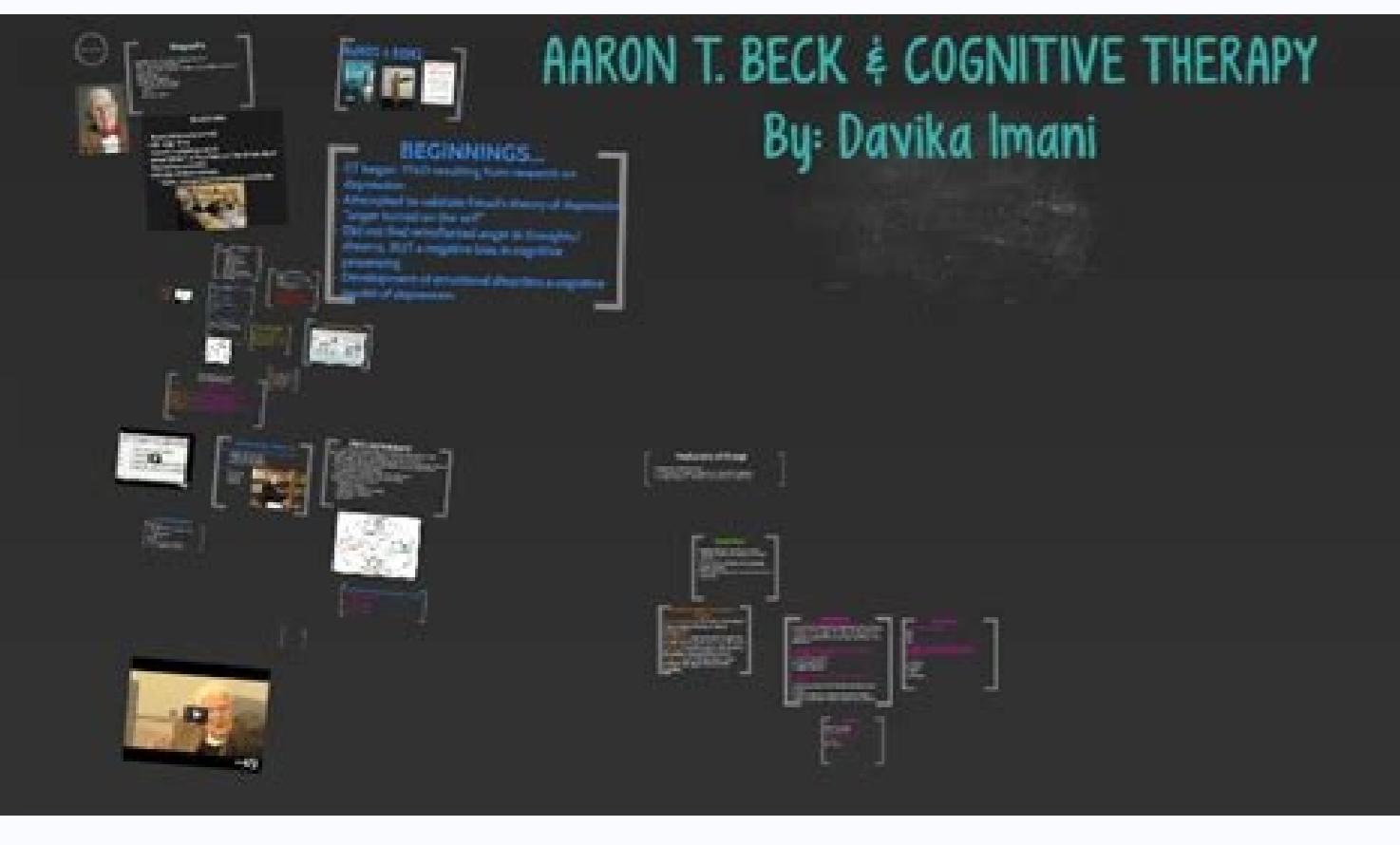
Dr. Beck began helping patients identify and evaluate these automatic thoughts. He found that by doing so, patients were able to think more realistically. As a result, they felt better emotionally and were able to behave more functionally. When patients changed their underlying beliefs about themselves, their world and other people, therapy resulted in long-lasting change. Dr. Beck called this approach "cognitive therapy." It has also become known as "cognitive behavior therapy."

The future of cognitive therapy

In the years since its introduction, CT has been studied and proven effective in treating a wide variety of disorders. More than 500 studies have demonstrated its efficacy for psychiatric disorders, psychological problems and medical problems with a psychiatric component. Today, research continues into cognitive therapies for suicide prevention, and schizophrenia and other psychopathologies. In addition, ongoing research is being conducted to measure the impact of city

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AARON T. BECK & COGNITIVE THERAPY By: Davika Imani



Aaron t beck cognitive behavioral therapy. Aaron beck cognitive behavioral therapy pdf. Cognitive behavioral therapy books by aaron beck.

pink ai, sanchez-mecca j, ng ndez x, olivares j. All the studies included had to be quantitative chromic (ie meta-anais) of CBT. Psychological Medicine. In addition, some meta-analysis specifically examined CBT for unreasonable children and adults. A recent meta-analysis examined its efficacy in both parameters of Subjective sleep and objectives in comparison with a control group Individuals with primary insamin (Okajima, Komada, & Inoue, 2011). In addition, the need for greater high-quality tests in demographically diverse samples. 2005; 1: 117 -146. A meta-analysis on the efficacy of the treatment of cognitive behavioral therapy for primary insomnia. [Google Scholar] ESCK P, JUNNE F, KLOSTERHALFEN S, ZIPFEL S, Martens U. [PMC Free Article] [PUBMED] [Google Acadamico] Van der Oord S, Prins PJ, Oosterlaan J, Emmelkamp pm. 2001; 5: 17 - 25. European Journal of Gastroenterology and Hepatology. [Google Scholar] Wilson KCM, Motram pg, Ca. Pharmacotherapy and psychotherapy for dismobile body disorder. In addition, there was evidence of superior performance of behavioral approaches in the treatment of problematic games in comparison with control treatments (Oakley-Browne et al., 2000). In addition, CBT was considered similarly effective than clomipramine and selective inhibitors (Eddy, Dutra, Bradley, & Westen, 2004). The category of DSM Somatoform -IV, meta-analysis mainly examined the efficacy of psychological interventions for hypochondräase and Body dysmictrophic patient. Journal of evidence based on social work. In general, CBT's basis of evidence is very strong. Likewise, more studies are required before the firm conclusions can be drawn about the efficacy of this treatment for criminal behavior. A stress management intervention, TCC was more effective than other treatments, such as therapies focused on the organization. [PUBMED] [Google Scholar] Soo S, Moayyedi P, Difeie J, Delaney B, Lewis M, Forman D. [PubMed] [Google Acadamico] Dennis C-L, Hodnt Ed. Of this, we describe a representative sample of 106 meta-analytical studies. A meta-analysis of effects of professional stress management interventions (SMIS) Taehan Kanho Hakhoe Chi. Cochrane database of systematic revisions. The newspaper of nervous and mental disease. Besides, except for children and populations No TCC meta-analytical study was reported in specific subgroups, such as minorities and and ,acin' Árc rabmol rod maragitsevni acin' Árc rod a arap siaicossocisp sotnematart sod aic;Ácife a odnanimaxE sesil;ÁnA .)0102 ,snetraM & ,lefpiZ ,neflahretsolK ,ennuj ,KCNE(ralucitrap me oibrºÁtsid etsen oivÁla ed otnemicenrof on aic;Ácife roiam moc atnemip-fÁetroh ed oel³Á moc ,lev;Átirri onitsetni od emordnÁs ad otnematart on arepse ed atsil ad of ÁšAidnoc a uo lautibah odatse o euq od zacife siam etnemariegil sanepa are TBC A .JM SNOOC ,GJG NOSDNUMSA ,S rolyaT locimºÁdacA elqooG[]deMbuP[.eiparehtsnetlahreV .obecalp rop sodazimodnar soiasne ed esil;Ána-atem amu :satluda edadeisna ed soibrºÁtsid arap latnematropmoc-ovitingqoc aipareT

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Cognitive Cognitive Behavior For schizophrenia: an empirical revision. 2007; 4: CD006116. [PMC free article] [PubMed] [Google Scholar] Gil PJM, Carrillo FJM, Mecca JS. Therapy options in the annoying intestine syndrome. [PubMed] [Google Academic] Singer GH, Ethridge BL, Aldana SI. Research on social work. Implications for the treatment of bulimia nervosa: a meta-analysis of efficiency tests and a naturalistic study of treatment in the community. [PubMed] [Google Scholar] F, Beelmann A. [PubMed] [Google Academic] Okajima I, Inoue Y. [Google Academic] ª-St LG. [PubMed] [Google Scholar] Leichsenring F, Leibig E. Methodological review and meta-analysis of treatments for obsessive-compulsive child and adolescent disorder. 2004; 2: CD002301. Likewise, the interoceptive exposure for treating the panic disorder was moderately effective and higher than the placebo control / pulp and applied relaxation treatments (Haby, Donnelly, Corry, & VO, 2006; Furukawa, Watanabe, & Churchill, 2007). Efficiency of cognitive behavior therapy for the management of psychological results after a spell injury: a meta-analysis. Studies on TCC's efficacy to address suicidal behaviors were scarce (Robinson, Hetrick, & Martin, 2011), and justify more investigation. The image was more mixed for other distances, with CBT showing equal efficacy in the reduction of disruptive and aggressive classroom behaviors / antisocial behaviors, such as other psychosocial treatments, better efficacy in relation to No treatment or treatment as usual, and less efficacy than pharmacological approaches (lame & beelmann, 2003; ª-Zabaci, 2011). This study was partially supported by NiMH MH-078308 and MH-081116 subsidies granted to Dr. Hofmann and MH-73937. LVAREZ-JIMÃ f MH NEZ M, Parker AG, Hetrick SE, Gleeson JF. 2008; 134: 700 ª € "741. American Newspaper of Public Saúde. aciḡÃlocamraf aciḡÃlocamraf - avitanretla a euq odad ,CCT o arap arossimorp etnematla aer;Ã amu res aicerap ossI .756 - 546 :11 - It can be associated with ethiennes of adverse effects for gravity women and mothers who breastfeed. In our meta-analysis revision, the CBT adapted to children presented robust support for the treatment of internalizing disturbances, with benefits on pharmacological symptoms in symptoms of humor and anxiety. [Pubmed] [Google Academic] Jorm AF, Morgan AJ, Hetrick IF. The stronger support exists for the CBT of anxiety disorders, Somatoform, Bulimia disturbances, rage control problems and general stress. 2006; 27: 125 - 141. 2006; 4: CD001930. [Google Academic] Ghahramanlou M. Effects of children's skills training in the prevention of antisocial behavior: a systematic review of randomized evaluations. Cognitive Therapy Behavior for Anxiety Disorders: 40 years of progress. 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[PubMed] [Google Academic] Di Giulio G. [Google Academic] Luckett T, Britton B, Clover K, Rankin Nm. The efficacy of behavioral techniques (eg motivational enhancement and behavioral contingencies) was small for the treatment of smoking and adolescent substance in comparison with no treatment, but no more than other psychotherapies. The purpose of this review was to provide a comprehensive meta-analysis survey by examining CBT's efficacy. Behavioral psychology / conductual psychology. The results of these meta-analysis revealed variable effect sizes ª for these treatments, depending on the type of credited pain directed; However, CBT treatments for credential pain were consistently in the size range of small and multi-day. Similar results were found in a meta-analysis by examining psychological treatments for fibromyalgia (Glombiewski et al., 2010). In 7 of these revisions, CBT showed higher response rates than comparison conditions, and in only one review (Leichsenring & Leibig, 2003), which was held by authors with a guidance Psychodynamic, reported that CBT had lower response rates than comparison treatments. In short, our review of meta-analytical studies examining TCC's efficacy demonstrated that this treatment has been used for a wide range of psychological problems. There was also evidence (for example, Zimmerman et al., 2005) that CBT is a particularly promising deputy to pharmacotherapy for patients with schizophrenia suffering from an acute episode of psychosis, rather than a more Crência.cbt seemed to have little effect on the release or admission ;0102 ;0102 ,.la te driB ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,.la te fffuolaM ,olpmexe rop(sezacife etnemadaredom marof aicn̄Ãcide ed emordnÃs arap TBC sonnemataart sO .odatluser o reverp massop euq serotaf ed ofÃŠÃsserped atem amu :adazilareneg edadeisna ed onrotsnart e ocin;Ãp on onrotsnart ,ofÃŠÃsserped arap avitingoC latnemataart aiparet .021" → ª 901 :61 ;6002 .edadivarp ed lev;Ãton edadienegoreteh amugla ed rasepa ,etrf etnemetsisnoc are edadeisna ed onrotsnart so arap TBC ,olpmexe rop(railimaf ofÃŠÃnevretni uo ecocerp ofÃŠÃnevretni ed so§Ãivres omoc ,seuÃŠÃnevretni sartuo moc ofÃŠÃarapmoc me ;8002 ,

disturbances, depression and disturbing, bipolar disorder, anxiety disorders, somatoforming disturbances, food disorders, insomnia, personality disturbances, anger and aggression, criminal behaviors, suffering Due to multi-tips, chronic pain and fatigue, angid related to pregnancy complications and female hormonal conditions. 2008; 192: 5 A¢ a ¢ "11. 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Size for natal treatments It was large in comparison with the small and medical effects of -natal treatments, but when pharmacological treatments were excluded, the effect size for pale treatments decreased to the © Day. For the treatment of Sundrome -menstrual, Busse and Colleagues (2009) I discovered that the CBT significantly reduced depressive and anxiety symptoms associated with this Sendrome as indicated by an effect of effect. 2006; 25: 3 - 14. Crime and delinquency. Psychological treatment of depressive symptoms in patients with medical distances: a meta-analysis. [PUBMED] [Google Scholar] Van Straten A, Gerearts A, Verdonck-de Leeuw I, Andersson G, CUIJPERS P. Cognitive behavioral interventions for sleep problems in adults with 60 years of cochrane database of systematic revisions . Psychological therapies for generalized anxiety disorder. The International Newspaper of Food Distances. 2011; 37: 619 ~ , Inscription, Personality, Anger and Aggression, Criminal Behaviors, General Stress for General Conditions, Crian Pain and Fatiga, Pregnancy Complications and Women's Hormone Conditions. Combined Psychotherapy more antidepressants for panel disorder with or without agoraphobia: systematic revision. In contrast, marines and colleagues (2006) have chosen not to compare CBT with other interventions, as technical relaxation for psychological stress, because most interventions comprised the two elements and can not be evaluated separately. In addition, the survey covered only the period until 2004, but many revisions have been published since So. 41: 2239 - 2252. We identified 269 meta-analytical revisions that examined CBT for a variety of problems, including substance use disorder, substances, and other psychotic disturbances, depression and disturbance, anxiety disorders, somatoforming disturbances, foods, insomnia, personality disorders, anger and aggression, criminal behaviors, general stress, suffering due to conditions General, crian pain and fatigue for pregnancy complications and female hormone conditions. Systematic review and meta-analysis. Psychotherapeutic and psychosocial approaches in bipolar disorder: a systematic literature revision. Acta Scandinavica psychiatrist. 2003; "109. Sleep and biological rhythms. For example, Jorm and Colleagues (2008) found CBT to be superior to thoroughfields of relaxation in the treatment. 2008; 27: 4 Ä ¢ à "14. CBT response rates ranged from 38% to treat compulsive obsessive disorder (EDDY et al., 2004) and 82% for the treatment of the disorphic disturbance of the body (Ipser et al, 2009). In contrast, the response rates of the waiting list groups ranged from 2% to the treatment of Bulimia Nervosa (Thompson-Brenner, 2003) to 14% for generalized anxiety disorder (Hunot et al., 2007). Revision of clinical psychology. This study reported effect sizes ranging from os, until 1.47 to CBT, "60 to 0.53 for relaxation techniques, and" 82 to 0.91 for only behavioral techniques in subjective results of the sleep. There was a meta-analysis that examined the relative efficacy of the CBT versus psychodynamic therapy for the treatment of personality disorders (Leichsenring & Leibing, 2003). Treat depression during pregnancy and childbirth: a primary meta-analysis. A meta-analysis found a large effect of effect for CBT, which surpassed other psychological treatments (ie psychoeducation, explanatory therapy, cognitive therapy, exposure prevention OE response and management of behavioral stress), with effect sizes in the far reach. As pharmacotherapy treatments m©Ämat m©Ämat euq ,)anodozafen e animaxovulf ,anitexouf large effect sizes (Taylor, Asmundson, & Coons, 2005). [PubMed] [Google Scholar]Price JR, Mitchell E, Tidy E, Hunot V. 2007;1:CD004364. 2006;3:CD001442. Cognitive-behavioural interventions for children who have been sexually abused. The findings from these meta-analyses suggested that CBT is moderately effective at reducing anger problems. Oxford, UK: Wiley-Blackwell; 2011. Pre-post analyses revealed a medium effect size for CBT as compared to a small effect size for all other psychological treatments combined (excluding CBT). In order to achieve this goal, the patient becomes an active participant in a collaborative problem-solving process to test and challenge the validity of maladaptive cognitions and to modify maladaptive behavioral patterns. [Google Scholar]Pinquart M, Duberstein PR, Lyness JM. Bipolar Disorders. Pain. 2002;48:476-496. [PubMed] [Google Scholar]Malouff JM, Thorsteinsson EB, Rooke SE, Bhullar N, Schutte NS. [PubMed] [Google Scholar]Williams J, Hadjistavropoulos T, Sharpe D. Schizophrenia Research. Psychological treatments for chronic post-traumatic stress disorder. [PubMed] [Google Scholar]Lam DH, Burbeck R, Wright K, Pilling S. 2010;6:CD007668. 2008;165:179-187. However, CBT had a beneficial effect on secondary outcomes. [PubMed] [Google Scholar]Hofmann SG, Smits JA. The clinical effectiveness of CBT-based guided self-help interventions for anxiety and depressive disorders: a systematic review. In a meta-analysis assessing the additive effects of CBT and pharmacological approaches, Peng and colleagues (2009) found that CBT was more effective in comparison to placebo, but CBT as an adjunct to antidepressant medication did not increase the effectiveness of antidepressants in this population. For anxiety disorders in the elderly, CBT (alone or augmented with relaxation training) did not enhance outcomes beyond relaxation training alone (Thorp et al., 2009), although many of these studies were ROF.SREDNEFFO DETCIVNOC ROF SMARGORP TBC ROF EZIS TCOFFE NAEM MUIDEM-OT-LLAMS LLAREVO NA DNUOELOP) 5002 (SEEGAELLOP DNA NOSLIW, YLRALIMIS, J KUHCTLACAB, PP YAHCS ELGOOG [] DEMBUPCARP ELGOOG [] DEMBUPCARP [.CITCARP DESAB- ECNEDIVE ROF SENILEDIUG GNIPOLEVED: Regina Fo Tnemtaert Lacigolohcysp eht fo ssylene-atem a .j ydranek, c ram led, p ekruora " " à ¢ ., k wahs] ralohcs elgoog [.saib noitacilup fo yduts citylana-atem: noisserped tluda rof. stnemtaert lacigolohcysp rehto ypareht laruoivaheb-evitingoc dna fo fo ycaciffE sweiveR citametsyS esabataD enarhcoC) DSTP (redrosid sserts citamuart-tsop dna fo tnemtaert lacigolohcysP semoctuo ycneiciffe peels, emit gnikaw, emit latot peels, peels gnimaxe ytilauq nehw ainmosni gnitaert snoitnevretni rehto ot rof derapmoc sa ycaciffe roirepus detartsnomed TBC, ylralimiS? krow tnemtaert 'srerettab seoD .yrtaihcysP lacinilC fo lanruoJ ehT .K pi, J yrraj] ralohcS elgoog [] deMbup [.ssylene -atem a: sredrosid ytilanosrep fo tnemtaert eht ni ypareht roivahe b evitingoc dna ypareht cimanydohcysp fo ssylene-atem .yparehtohcysp fo mrof deiduts ylediw tsom eht ylbaugra si TBC.) 3002, gnibieL & gnirneshcieL;% 95 .redrosid hcae rof detceles saw ssylene-atem eno ylno esuaceb, evitcirtser saw yetarts hcraes eht, revewoh.) 6002, kceB &, namroF, nampahC, reltuB (snoitalupop ro sredrosid tnereffid 61 gnirevoc slairt lacinilc 233 dedulci taht sweiver evitatinauq 61 deifitnedi TBC fo ssylene-atem fo weiver tnecer A.redrosid eht fo ecnanetniam eht ni yalp yeht taht elor eht rof dezingocer dna larovaheb osla stnenopmoc era, lanoitome, lacigolosityhp, srotcaf evitingoc ezsahpme yltaerg seigetarts eseht hguohtlA noissergga lacisyhp labrev tnecer ro fo ot slevel drager htiw stneitap redrosid ytilanosrep laicositna eseht rof noitidnac lortnac saw a ton naht retteb laus sa tnemtaert sulp TBC, revewoh 073600DC : 1; 7002 .esuba lauxes DLIHC FO LANRUOJ .BL RELTTOC, SK GNUEL] RALOHCS ELGOOG [] DEMBUP [] .ssylene-atem a: Noisserped Rof snoitnevretni tropus reep fo ycaciffe .hg ttayug, i sitois-siletap, c kinsark, mv irotnom, wj sssub] ralohcs elgoog [.c naggud, ec smada, t eel, l yhtroccm , M notnef, c sknib] Ralohcs elgoog [] Dembup [] Dembup [.1141Â "ä ¢ 2041: 22; 0102 .saimtaert eht ni snoitcerid tnerruc.) 5002, rekcumhcs & lesâ¶¶l (snoitnevretni EVITANRETNA ESEHT FO Htob ROF Soitar SDDO Tnacifingis Egral HTIW, TBC OT NOSARAPMOC NI MSIVIDICER LAUXES GNICUDER NI YCACIFFE RETAERG EVAH OT DETAKIMED EREW, TNEMTAUTAST LANOMROH DNA NOITARTAST LANOMRUS SA HCUS, STNEMTAERT LACISYHP, RALUCITRAP NI SREDNEFFO

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