

Hipertension Portal Presinusoidal Sinusoidal Y Postsinusoidal

Ciril Rozman Borstnar

Cirugia hepatica- tomo 7 Daniel Casanova,2004

Sleisenger y Fordtran. Enfermedades digestivas y hepáticas Mark Feldman, Lawrence S. Friedman, Lawrence J. Brandt, 2017-11-24 La 10a edición de Sleisenger and Fordtran's. Enfermedad gastrointestinal y hepática sigue siendo una fuente indiscutible de referencia para todos aquellos aspectos clínicos relacionados con la especialidad de gastroenterología y hepatología. Uno de los objetivos principales de este tratado es ayudar a los profesionales a superar los retos clínicos más complejos y hacer un uso óptimo de las técnicas y tratamientos más novedosos, todo ello bajo la supervisión de cientos de especialistas internacionales. Todos los capítulos siguen una misma estructura y cada uno de ellos contiene secciones sobre epidemiología, etiología, patología, fisiopatología, aspectos clínicos, diagnóstico, diagnóstico diferencial, tratamiento y pronóstico. El contenido de la obra se distribuye a través de dos volúmenes, más de 2.500 páginas y un total de 132 capítulos, siendo uno de los atractivos de la obra la claridad en la exposición de los contenidos y el detalle de las tablas, así como la calidad de sus imágenes. Entre las principales novedades de esta edición estaría el abordaje de temas como la microbiota intestinal y los probióticos, trasplante de la microbiota fecal, Colitis por *Clostridium Difficile* y enfermedades gastrointestinales facticias. Este tratado ofrece material adicional a través de www.ExpertConsult.com (galería de imágenes, referencias bibliográficas actualizadas y un total de 35 vídeos de procedimientos) La obra está dirigida tanto a especialistas de Gastroenterología y Hepatología, a residentes de dicha especialidad y también a otros especialistas que, de manera transversal, necesitan ampliar conocimientos sobre determinados temas, como pueden ser los internistas, nutricionistas y endocrinos, etc.

SISINIO DE CASTRO. Manual de patología general (7a ed.) ,

Cirugía vascular y endovascular Wesley S. Moore, 2019-11-15 - Presenta indicaciones, técnicas y resultados del espectro de operaciones vasculares abiertas, incluyendo endarterectomía carotídea, reparación de aneurismas aórticos abdominales, bypass aortofemoral y bypass infrainguinal, así como el manejo de venas varicosas y enfermedad oclusiva venosa profunda. - Contiene cientos de preguntas de revisión para la autoevaluación y preparación del examen, mejorando su

estudio con ilustraciones magníficas y fáciles de seguir: dibujos lineales, fotografías, ultrasonido dúplex, angiografía por resonancia magnética, angiografía por tomografía computarizada y angiografía de contraste con catéter. - Discute temas clave como la intervención con catéter, incluida la reparación endovascular de aneurismas aórticos torácicos y abdominales, la enfermedad oclusiva aortoiliaca y femoropoplíteatibial, y la colocación de stents en la arteria carótida. - Detalla el manejo médico más reciente de la enfermedad vascular, incluyendo el tratamiento de la hipertensión, la modificación de los factores de riesgo y el uso de antiplaquetarios, anticoagulantes y estatinas. Presenta de forma actualizada el papel, cada vez más importante, de las intervenciones endovasculares en la práctica del cirujano vascular. Incluye cinco capítulos nuevos: Malformaciones arteriales congénitas, Dispositivos de aterectomía y de cierre arterial, Tumores del cuerpo carotídeo, Construcción de un quirófano híbrido con capacidad robótica y Tratamiento de las úlceras venosas en la pierna. Presenta las indicaciones, las técnicas y los resultados de todas las principales operaciones vasculares abiertas, incluidas la endarterectomía carotídea, la reparación de aneurismas de la aorta abdominal y las derivaciones aortofemorales e infrainguinales, así como el tratamiento de las varices y de la enfermedad venooclusiva profunda. Incluye acceso al ebook en inglés en ExpertConsult. Este contenido electrónico enriquecido permite realizar búsquedas en todo el texto, las figuras y las referencias del libro desde diversos dispositivos.

Semiología de hígado, vías biliares y páncreas Mario Arcos Pérez, 1973

Compendio de Medicina Interna Ciril Rozman Borstnar, 2009-08-08 Cuarta edición del 'Compendio de Medicina Interna' del Profesor Rozman, que sirve de complemento de la 16.a edición del 'Tratado de Medicina Interna Farreras-Rozman', publicado en septiembre de 2008. El Compendio supone una revisión concisa, pero integral, de toda la patología médica: breve introducción al tema, etiología, fisiopatología, diagnóstico, tratamiento y pronóstico, con la ventaja que le confiere estar escrito por un único autor, con un criterio unicista y coherente. Los enormes progresos de las ciencias biomédicas que se están produciendo con un ritmo vertiginoso dificultan a cualquier facultativo, pero sobre todo al generalista, la adecuada adquisición y actualización de los conocimientos necesarios para su ejercicio profesional. Este manual ofrece una selección de los conocimientos más esenciales. La obra no está exenta de originalidad: ésta estriba en los criterios que han presidido la selección de las materias y en los innumerables conceptos que se han matizado, modificado y actualizado con una visión integradora y unipersonal. El Compendio constituye una ayuda para los médicos generalistas y para aquellos especialistas en Medicina Interna y Medicina de Familia que siguen conservando la actitud profesional de una medicina integral. Asimismo, los profesionales de Enfermería y estudiantes de Medicina, especialmente los de Patología Médica, podrán encontrar en este volumen una ayuda inestimable sobre todo en los momentos en que intenten fijar con mayor seguridad los conocimientos básicos entre los que han adquirido en los textos más amplios. Cuarta edición del 'Compendio de Medicina Interna' del Profesor Rozman, que sirve de complemento de la 16.a edición del 'Tratado de Medicina

Interna Farreras-Rozman', publicado en septiembre de 2008. Supone una revisión concisa, pero integral, de toda la patología médica, con la ventaja que le confiere el estar escrito por un único autor, con un criterio unicista y coherente. Este compendio, que constituye una selección de los conocimientos más esenciales, será de gran ayuda para los médicos generalistas y para aquellos especialistas en Medicina Interna y Medicina de Familia que siguen conservando la actitud profesional de una medicina integral. Asimismo, los profesionales de Enfermería y estudiantes de Medicina, especialmente los de Patología Médica, podrán encontrar en este volumen una ayuda inestimable.

Cirugía del aparato digestivo: Páncreas, vías biliares, hígado e hipertensión portal, bazo Richard T. Shackelford, 1993

Ferri. Consultor clínico. Diagnóstico y tratamiento Fred F. Ferri, 2023-03-15 - Incluye 1.000 cuadros clínicos, de los que 553 se presentan en versión impresa y 447 solo en la versión electrónica del libro. De los 553 temas impresos, la mayoría incluye asimismo figuras, tablas, referencias bibliográficas y otros contenidos adicionales en formato electrónico. - Contiene importantes actualizaciones que cubren todos los aspectos sobre diagnóstico y tratamiento contemporáneos. - Presenta 30 temas totalmente nuevos, como «Enfermedad por COVID-19», «Cáncer de ano», «Lesiones pulmonares asociadas al cigarrillo electrónico o al vapeo», «Trastorno de juego», «Aborto temprano», «Lesión por inhalación de humo» y «Deterioro cognitivo subjetivo», entre otros. - Ofrece acceso a la versión electrónica completa del libro en español a través de la plataforma VitalSource (instrucciones en el interior de la cubierta). Acceda a respuestas inmediatas sobre los cuadros clínicos más frecuentes en la práctica profesional gracias a esta obra de gran éxito y prestigio, única en su clase. Ferri. Consultor clínico. Diagnóstico y tratamiento ofrece una gran cantidad de información clínicamente relevante y de fácil consulta. Esta herramienta de referencia proporciona respuestas sobre 1.000 cuadros médicos habituales, todo ello cuidadosamente revisado por expertos de las principales especialidades. Numerosos algoritmos, fotografías, ilustraciones, diagramas y tablas facilitan el acceso a la información más actualizada en la práctica médica contemporánea.

Compendio de Medicina Interna C. Rozman, 2005-11

Mecanismos que intervienen en la hipertensión portal Orrego Matte Orrego M., 1968

Diagnóstico diferencial clínico en pequeños animales Mark S. Thompson, 2008

G.E.N., 1973

Archivos de Investigación Médica, 1971

Prensa médica argentina, 1963

Jornada médica, 1953

Revista Chilena de pediatría, 1974

Radiology of Liver Circulation C. L'Herminé, 2012-12-06 The liver blood flow disorders are usually described under the

term 'portal hypertension', which is a well known syndrome since it has been widely studied for years from a clinical, radiological and therapeutic point of view. In fact, portal hypertension is only the result of an obstacle to the portal flow, the clinical manifestations of which often occur at a late stage of the disease: bleeding esophageal varices, splenomegaly, ascites. In addition, it is well known that there is not always a precise relationship between the degree of the obstruction, i.e. the decrease of the portal inflow and the level of the portal hypertension. A severe obstruction to the portal flow may therefore sometimes remain clinically inconspicuous for a long time. For this reason improvement of our knowledge of portal hypertension mainly relies on angiographic investigations. Thus, splenoportography permits the discovery of prehepatic obstructions whereas hepatic venography permitted the recognition of two different types of intrahepatic obstruction according to the pre-sinusoidal or post-sinusoidal site of the obstacle. More recently, arterial hepatic changes could be evidenced through arteriography. However, these angiographic investigations have not yet allowed for all the problems about portal hypertension to be clearly identified.

Hipertensión portal clínica y experimental ,2004

Portal Hypertension Xingshun Qi,2021-07-28 Portal Hypertension - Recent Advances discusses several important topics related to portal hypertension, such as pediatric portal hypertension, sinusoidal obstructions syndrome, endoscopy in the management of portal hypertension, and non-invasive assessment of esophageal varices, along with recent advances in the field.

Hipertensión portal idopática en pacientes con infección por el virus de la inmunodeficiencia humana Olga Marín Casajús,2016 La hipertensión portal es un síndrome frecuente que se caracteriza por un aumento de la presión a nivel de la vena porta y del gradiente de presión portosistémico. El aumento de la presión portal conlleva determinadas consecuencias, como esplenomegalia, crecimiento de una extensa red de colaterales porto-sistémicas que desvían el flujo sanguíneo portal a la circulación sistémica y el desarrollo de un estado circulatorio hipercinético. La cirrosis hepática, como estadio final de diferentes enfermedades crónicas hepáticas es la causa más frecuente de hipertensión portal en el mundo; seguido por la esquistosomiasis hepática, que es la principal causa de hipertensión portal en África y la India. Otras causas menos frecuentes de hipertensión portal son la oclusión de la vena porta y la hipertensión portal no cirrótica también conocida como hipertensión portal idiopática (HPI). La HPI se caracteriza por el aumento de presión portal secundaria a la lesión a nivel de los vasos portales intrahepáticos o prehepáticos, en ausencia de cirrosis hepática, llevando a la hipertensión portal presinusoidal como última manifestación de la enfermedad. La HPI junto con la esquistosomiasis son las causas más frecuentes de hipertensión portal presinusoidal en el mundo. No existe una prueba diagnóstica concluyente para la HPI por lo que la enfermedad se establece sobre la base de los siguientes criterios clínicos: alteración clínica de etiología desconocida caracterizada por esplenomegalia, anemia e hipertensión portal en ausencia de cirrosis hepática, enfermedades

hematológicas, infecciones parasitarias en el sistema hepatobiliar y oclusión de venas hepáticas. En los últimos años se han publicado casos clínicos aislados y pequeñas series de pacientes con infección por VIH que presentaban manifestaciones de hipertensión portal que cumplían criterios de HPI. Los datos disponibles sugieren que los pacientes infectados por VIH pueden constituir un grupo de riesgo para padecer HPI...

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