

GI/liver secrets plus

McNally, Peter R. (1954-)

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Mosby/Elsevier, c2010

Electronic books

Monografía

GI/Liver Secrets Plus, 4th Edition, by Peter R. McNally, DO, FACP, FACG - a volume in the popular Secrets Series[®] - uses a convenient Q&A approach to provide rapid reference and review of today's most common GI and liver disorders and their management. An expanded size and layout, user-friendly two-color page layout, question-and-answer approach, and list of the ""Top 100 GI/Liver Secrets"" make it a perfect concise board review tool and a handy clinical reference. Updated coverage throughout equips you with all of the most current and essential knowledge in the field

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Descripción física: 1 online resource (638 p.)

Variantes del título: GI/liver secrets

Mención de serie: Secrets series

Nota general: Rev. ed. of: GI/liver secrets. 3rd ed. c2006 On cover: Questions you will be asked, top 100 secrets, key points, web sites

Bibliografía: Includes bibliographical references and index

Contenido: Gi/Liversecrets Plus; Copyright page; Dedication; Contributors; Preface; Contents; Top 100 Secrets; Chapter 1: Swallowing Disorders and Dysphagia; 1. What is the most difficult substance to swallow?; 2. What sensory cues elicit swallowing?; 3. What is the difference between globus sensation (globus hystericus) and dysphagia?; 4. What are common etiologies of globus sensation?; 5. Do patients accurately localize the site of dysphagia?; 6. What are the differences between esophageal and oropharyngeal dysphagia?; 7. What symptoms can be seen in oropharyngeal dysphagia? 8. What are the causes of oropharyngeal dysphagia?9. What causes oropharyngeal dysphagia in the elderly?; 10. Why is a brainstem stroke more likely to cause severe oropharyngeal dysphagia than a hemispheric stroke?; 11. When is it appropriate to evaluate stroke-related dysphagia?; 12. Is a

barium swallow examination adequate to evaluate oropharyngeal dysphagia?; 13. What is the characteristic feature of dysphagia in myasthenia gravis?; 14. Why is simultaneous involvement of the oropharynx and esophagus extremely unusual for any disease process other than infection? 15. What is Zenker diverticulum?16. Are Zenker diverticula the result of an obstructive or a propulsive defect?; 17. What are the treatment options for Zenker diverticula?; 18. How does flexible endoscopic therapy differ from standard surgical therapies?; 19. What are the early complications following endoscopy therapy for Zenker diverticulum?; 20. What are the indications and late risks of a cricopharyngeal myotomy?; 21. When should you consider performing flexible endoscopic therapy for Zenker diverticula? 22. What is the differential diagnosis of dysphagia in a patient who has had surgery, radiation, and chemotherapy for head and neck cancer?23. Are swallowing disorders related to an increased morbidity and mortality?; 24. What therapies can be used to improve swallowing?; 25. Which patients are ideal candidates for swallow therapy?; 26. What are the etiologies of dysphagia in gastroesophageal reflux disease?; 27. What are the common symptoms and causes of xerostomia?; 28. Why is cricopharyngeal achalasia a misnomer? How does it differ from classic achalasia? 29. When is botulinum toxin (BTx) used for dysphagia?Websites; Bibliography; Chapter 2: Gastroesophageal Reflux Disease; 1. What is gastroesophageal reflux disease (GERD)? How common is it?; 2. What are the typical symptoms of GERD?; 3. Is gastrointestinal (GI) hemorrhage a common symptom of GERD?; 4. What is odynophagia? Is it a common symptom of GERD?; 5. What clues about GERD can be gleaned from the physical exam?; 6. Do healthy persons have GERD?; 7. How can swallowing and salivary production be associated with GERD? 8. What are the two defective anatomic mechanisms in patients with GERD?

Lengua: English

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Materia: Digestive organs- Diseases- Examinations, questions, etc.

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