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LIDER CON RESPUESTAS

Alfonso Macias Torres
Account Development Manager LATAM



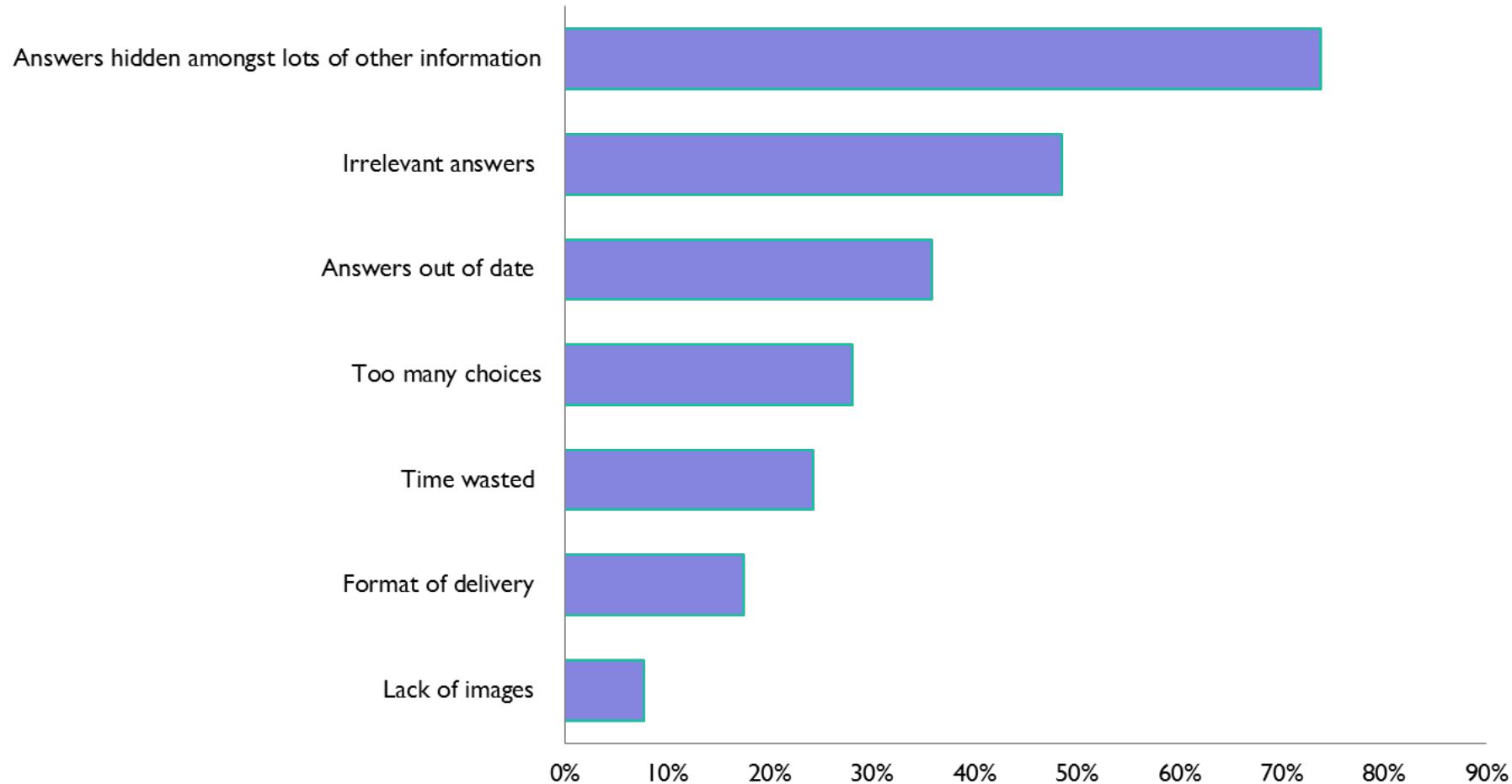
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Agenda

- 1. Motivos para la creación de CK**
- 2. 3 maneras de utilizar CK**
- 3. Ejemplo de Búsqueda**
- 4. Generación de Listas de Lectura**
- 5. Creación de Presentaciones**
- 6. Herramientas contenidas**

¿Segun las encuestas cuales son sus mayores frustraciones?



Pensemos en algunos impactos positivos cuando permitimos acceso a respuestas confiables...

- Calidad en educación médica
- Educación médica uniforme
- Tratamientos mas efectivos
- Reducción de exámenes innecesarios
- Reducción de riesgos
- Mas prácticas responsables
- Aumento en la productividad médica
- Y entre otras cosas, una mejora en calidad de atención en su institución

Aspectos Clave



Rápido:

Encuentra la información clínica más relevante cuando el tiempo es crucial en el cuidado del paciente.



Completo:

Accede a la colección de recursos más completa y actualizada de Elsevier a texto completo, en inglés y español, cubriendo todas las especialidades médicas y quirúrgicas. Ofrece resultados fiables siempre basados en la evidencia más reciente.



Inteligente:

El motor de búsqueda de ClinicalKey piensa como un médico, reconoce conceptos clínicos, en inglés y español, y los relaciona entre sí para ofrecer resultados relevantes.



Accesible:

ClinicalKey se adapta a ti. Puedes acceder desde donde quieras y cuando quieras porque está optimizado para dispositivos móviles.



Topic Pages

ClinicalKey

All ▾

Go to: Outline ▾

This is the topic page

DISEASE OVERVIEW

Obesity

Ferri's Clinical...

227 - Obesity

Goldman's Cecil
Copyright © 2011
Saunders, an imprint of Elsevier

Definition

> Specialty Views

> Related Drugs

> Related Patient Education

> Latest Articles

> Related Guidelines

Physical Activity

Prevention

Books Journals More ▾

Alfonso Macias ▾



> Specialty Views

> Related Drugs

> Related Patient Education

> Latest Articles

> Related Guidelines

Help & Feedback



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Búsqueda Con Filtros

The screenshot shows the ClinicalKey search interface. At the top, there is a search bar containing the query "obesity infarct adult". Below the search bar is a "Filter By" section with three dropdown menus: "Source Type", "Specialties", and "Date". Under "Source Type", "Books" is selected. Under "Specialties", "Cardiovasc..." is selected. A red arrow points to the search bar, and another red arrow points to the "Date" filter dropdown. Below the filter section, there are two checkboxes: one for "2 results" (unchecked) and one for "Subscribed Content" (unchecked). To the right, it says "Sort by: Relevance". The search results are displayed under the heading "BOOK CHAPTER". The first result is titled "Clinical and Genetic Risk Factors for Calcific Valve Disease", which is a chapter from the book "Valvular Heart Disease: A Companion to Braunwald's Heart Disease". The author is Owens, David S.; O'Brien, Kevin D., and it was published on January 1, 2014, with pages 53-62. The copyright year is 2014. The second result is titled "Top 100 Secrets", which is a chapter from the book "Cardiology Secrets".

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All ▾ obesity infarct adult

Filter By: Source Type ▾ Specialties ▾ Date ▾

Books × Cardiovasc... ×

2 results Sort by: Relevance ▾

Subscribed Content

BOOK CHAPTER

Clinical and Genetic Risk Factors for Calcific Valve Disease

Valvular Heart Disease: A Companion to Braunwald's Heart Disease.
Owens, David S.; O'Brien, Kevin D.. Published January 1, 2014. Pages 53-62. © 2014.

BOOK CHAPTER

Top 100 Secrets

Cardiology Secrets

A la Carta

ClinicalKey®

All

Search ClinicalKey for ...



Filter By: Specialties



Browse Books

Find by Title



[AAOS Atlas of Orthoses and Assistive Devices](#)

[Abdominal Imaging](#)

[Abeloff's Clinical Oncology](#)

[Abernathy's Surgical Secrets](#)

[Accident and Emergency Radiology: A Survival Guide](#)

Books Journals

More

Login Register

Browse Home

Drug Monographs

Guidelines

Patient Education

Multimedia

CME

Featured Books



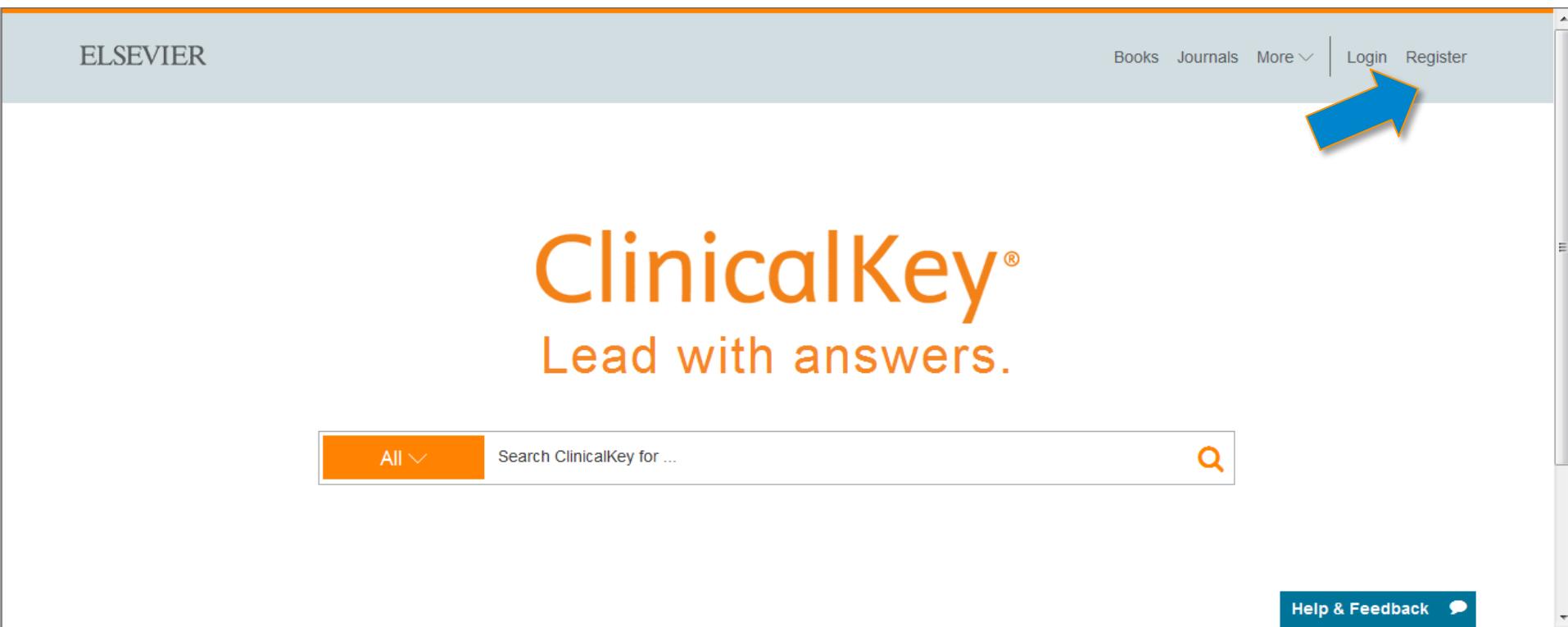
Goldma



Ferri's Clinical Advisor 2014

ELSEVIER

Inicio y Cuenta Personal



The screenshot shows the ClinicalKey homepage. At the top, there is a grey header bar with the Elsevier logo on the left and navigation links for Books, Journals, More, Login, and Register on the right. A blue arrow points to the 'Login' button. Below the header, the ClinicalKey logo is displayed with the tagline 'Lead with answers.' A search bar is present at the bottom of the page, and a 'Help & Feedback' link is located in the bottom right corner.

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Búsqueda

Objetivo

Obtener información sobre una base extensa sin perder de vista las siguientes condiciones de búsqueda:

- **Actual**
- **Confiable**
- **Concisa**
- **Exhaustiva**
- **Cantidad adecuada de materiales**
- **Sin costo adicional**
- **En el menor tiempo posible**

Buscador Taxonómico o Intuitivo EMMeT (Elsevier Merged Medical Taxonomy)

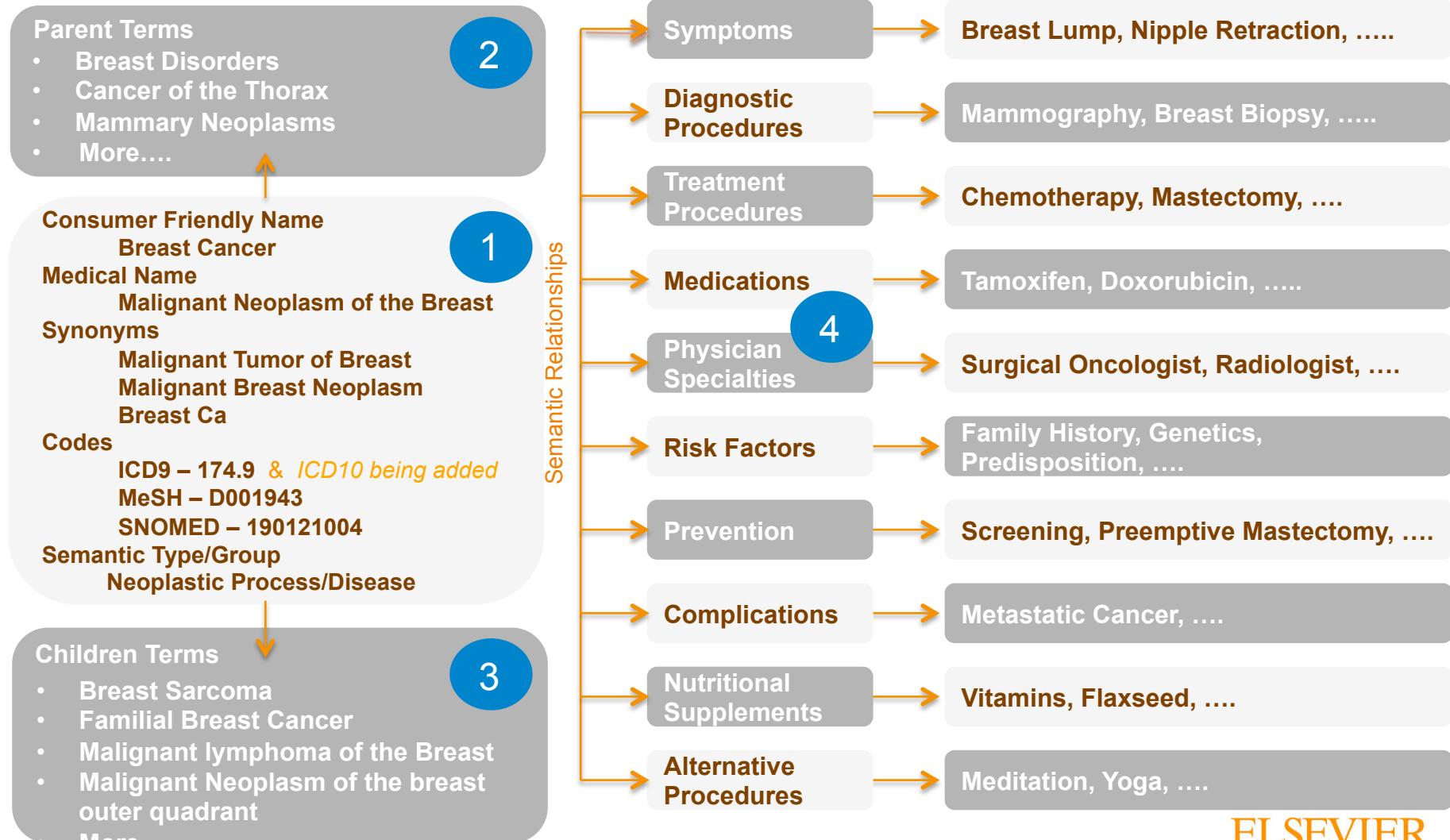
The screenshot shows the ClinicalKey search interface. At the top, there is a grey header bar with the Elsevier logo on the left, and 'Books', 'Journals', 'More', and a user profile for 'Alfonso Macias' on the right. Below the header is a large orange search bar containing the text 'Buscador Taxonómico o Intuitivo EMMeT (Elsevier Merged Medical Taxonomy)'. The main content area displays the results of the search, with the title 'ClinicalKey®' and the tagline 'Lead with answers.' prominently displayed in orange. Below this, there is a search bar with a dropdown menu set to 'All' and a magnifying glass icon. At the bottom right, there is a blue button labeled 'Help & Feedback' with a speech bubble icon.

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Velocidad de respuesta — Smart Content

- **Smart Content**
- Se basa en contenidos de búsqueda mapeados según una taxonomía exclusiva *Elsevier Merged Medical Taxonomy (EMMet)* que clasifica el significado de los términos por el contenido.
- Basada en el Sistema de Lenguaje Médico Unificado, **UMLS**, y que utiliza vocabularios estándar que incluyen:
 - MeSH – SNOMED CT – Rx Norm – ICD-9

Elsevier Merged Medical Taxonomy (EMMet)



Ingrese las primeras letras de su búsqueda y el buscador intuitivo le dará sugerencias, temas relacionados, libros y revistas y autores para adelantar en su trabajo

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Lead with answers.

| All ▾ | obes | | | |
|---|------------------------|----------------------------------|--|------------------------|
| | Suggestions | Related | Books and Journals | Authors |
| Contact Us Resource Center Terms & Conditions Privacy Copyright © 2014 Elsevier, Inc. All rights reserved. | Obesity | Lifestyle modification | Obesity Research & Clinical Practice | Obeidat, Basil |
| | Morbid Obesity | Exercise | Surgery for Obesity and Related Diseases | Obeidat, Basil R |
| | Bariatric Surgery | Dietary Modification | | Obeidat, Bayan A |
| | Overweight and obesity | Waist-to-Hip Ratio | Surgical Management OF Obesity | Obeidat, Bayan A., PhD |
| | Childhood Obesity | Gastric Bypass operation | | Obeidat, B R |
| | Central Obesity | History and physical examination | | Obeidat, B S |
| | Waist-to-Hip Ratio | | | Obeidate, Fawaz |
| | | Waist circumference | | |

Help & Feedback 

(24,073) resultados, que se subdividen en diversos materiales

ClinicalKey®

All ▾ obesity

Filter By: Source Type ▾ Study Type ▾ Specialt

24073 results 

Subscribed Content

BOOK CHAPTER
Obesity

Ferri's Clinical Advisor 2015.

Published December 31, 2014. Pages 838-840.e5. © 2015.

MEDLINE
Neighborhoods, obesity, and social experiment.

The New England journal of medicine.

Ludwin, Jens; Sanbonmatsu, Lisa; Gennettian, Lisa [Show all](#)

| Source Type | Study Type |
|--------------------|------------|
| MEDLINE Abstracts | 15871 |
| Full Text Articles | 5472 |
| Books | 1490 |
| Images | 692 |
| Clinical Trials | 395 |
| First Consult | 120 |
| Guidelines | 89 |
| Drug Monographs | 15 |
| Procedures Consult | 10 |
| Patient Education | 1 |

Books Journals More ▾ Alfonso Macias ▾

Help & Feedback 

ELSEVIER

Si agregamos palabras clave para refinar la búsqueda, obtenemos (1446) resultados, igualmente divididos en diversos materiales

The screenshot shows the ClinicalKey search interface. The search term 'obesity infarct adult' is entered in the search bar. A blue arrow points to this search bar. The results table displays the following data:

| Source Type | Study Type | Count |
|--------------------|------------|-------|
| Books | | 753 |
| Full Text Articles | | 664 |
| MEDLINE Abstracts | | 16 |
| Guidelines | | 7 |
| First Consult | | 6 |
| Clinical Trials | | 3 |
| Patient Education | | 3 |
| Images | | 1 |

On the left, there are filters for 'All', 'Source Type', 'Study Type', and 'Specialties'. Below the filters, there are two checked checkboxes: '1446 results' and 'Subscribed Content'. There are also sections for 'BOOK CHAPTER' with titles 'Endocrine and Metabolic Disorders' and 'Nutritional Diseases : Obesity and', and a section for 'Stoelting's Anesthesia and Co-Existing Disease'. At the bottom right, there is a 'Help & Feedback' button.

Podemos utilizar diversos filtros para reducir los resultados, El número de materiales se reducirá según lo que marquemos; Journals (664) artículos médicos a texto completo



The ClinicalKey search results page for the query "obesity infarct adult". The search bar shows the query. A blue arrow points to the "Specialties" filter dropdown in the main search header.

Books Journals More ▾ Login Register

All ▾ obesity infarct adult

Filter By: Source Type ▾ Study Type ▾ Specialties ▾ Date ▾

Full Text Ar... ×

664 results Sort by: Relevance ▾

Subscribed Content

FULL TEXT ARTICLE

Mesenchymal stem cells: A revolution in therapeutic strategies of age-related diseases

Ageing Research Reviews.

Peng, Yan; Huang, Sha; Cheng, Biao... Show all. Published December 31, 2012. Volume 12, Issue 1. Pages 103-115. © 2012.

FULL TEXT ARTICLE

Sex differences in the relationship between vigorous vs moderate intensity exercise and risk markers of

Help & Feedback

Filtro por Especialidad (174)

Filtro por Fecha (15)

| Specialties | Date |
|----------------------------|------|
| Advanced Basic Science | 15 |
| Allergy and Immunology | 5 |
| Anesthesiology | 15 |
| Cardiothoracic Surgery | 6 |
| Cardiovascular Disease | 174 |
| Critical Care Medicine | 10 |
| Dentistry | 3 |
| Dermatology | 6 |
| Emergency Medicine | 21 |
| Endocrinology, Diabetes... | 49 |

| Date | |
|----------------|-----|
| Last 6 months | 15 |
| Last 12 months | 36 |
| Last 18 months | 46 |
| Last 2 years | 62 |
| Last 5 years | 123 |

Adicionalmente

Filtro por Tipo de estudio que puede ofrecer desde el inicio de una búsqueda un enfoque a cierto tipo de materiales basados en Niveles de Evidencia

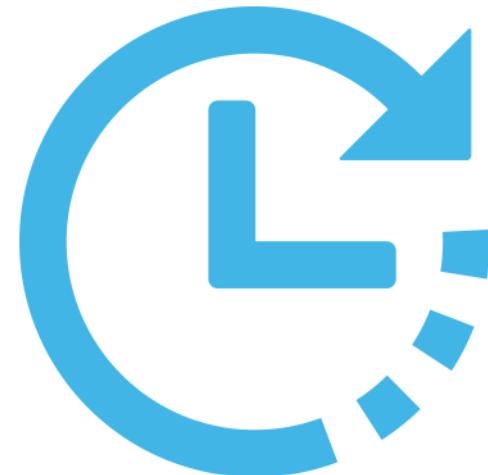
| Study Type | Specialties |
|---------------------------|-------------|
| Systematic Reviews | 274 |
| Meta Analysis | 195 |
| Randomized Control Tri... | 1256 |
| Narrative Review | 1985 |



Resultado (15) Artículos médicos a texto completo

Finalmente el objetivo se consigue con Información:

- Actual
- Confiable
- Concisa
- Exhaustiva
- Cantidad adecuada de materiales
- Sin costo adicional
- En el menor tiempo posible



Resultados

(24,073)

(1,446)

(664)

(174)

(15) Artículos médicos a texto completo

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Texto Completo, Última Edición (HTML y PDF)

Screenshot of the ClinicalKey website showing the download dialog box for a PDF file.

The dialog box is titled "Descarga de archivos" (File Download) and asks "¿Desea abrir o guardar este archivo?" (Do you want to open or save this file?). It displays the following information:

- Nombre: download.pdf
- Tipo: Adobe Acrobat Document, 2.41 MB
- De: d1niluo1dd30v.cloudfront.net

Buttons at the bottom are "Abrir" (Open), "Guardar" (Save), and "Cancelar" (Cancel). A blue arrow points from the top right towards the "Guardar" button.

The main content area shows a book chapter titled "Aortic Stenosis" by Catherine M. Otto and Robert J. Bonow. The chapter is part of "Valvular Heart Disease: A Companion to Braunwald's Heart Disease, Fourth Edition". The "Key Points" section lists:

- Aortic stenosis is the most frequent reason for valve interventions in North America and Europe.
- Echocardiography is the key diagnostic tool for diagnosis, quantification of stenosis severity, and assessment of secondary changes.
- Aortic stenosis is a progressive disease and the possibility of rapid hemodynamic progression needs to be considered.

On the right side, there is a sidebar with links for "Books", "Journals", "More", and "Alfonso Macias". Below the sidebar is a "Help & Feedback" button.

PDF (Guardar y/o Imprimir), Índice de contenidos

139 (1 of 24) | Find | 50.3% |

Bookmarks

- 11 Aortic Stenosis
 - Pathophysiology
 - Valvular Hemodynamics
 - Pressure Gradients
 - Valve Area
 - Other Indices of Stenosis Severity
 - Left Ventricular Pressure Overload
 - The Peripheral and Pulmonary Vasculature
 - Coronary Blood Flow
 - Exercise Physiology
 - Clinical Presentation
 - Clinical History
 - Physical Examination
 - Chest Radiography and Electrocardiography
 - Echocardiography
 - Stress Testing
 - Cardiac Catheterization
 - Disease Course
 - Clinical Outcome
 - Asymptomatic Patients
 - Risk Stratification in Asymptomatic Patients
 - Symptomatic Patients
 - Aortic Sclerosis and Mild to Moderate Aortic Stenosis
 - Hemodynamic Progression

CHAPTER 11 Aortic Stenosis

Raphael Rosenhek and Helmut Baumgartner

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Key Points

- Aortic stenosis is the most frequent reason for valve interventions in North America and Europe.
- Echocardiography is the diagnostic tool for diagnosis, quantification of stenosis severity, and assessment of secondary changes.
- Aortic stenosis is a progressive disease and the possibility of rapid hemodynamic progression needs to be considered.
- Patients with symptoms (dyspnea, angina, dizziness/syncope) with normal echocardiographic findings should be evaluated.
- A watchful waiting approach is generally safe in asymptomatic patients under the condition of regular echocardiographic and clinical examinations.
- Risk stratification is useful in asymptomatic patients, in that it allows identification of patients who may benefit from early elective surgery.
- Key elements in risk stratification include leaflet calcification, rate of hemodynamic progression, presence of symptoms, degree of stenosis severity, and exercise testing in physically active patients.
- There is no established medical therapy for aortic stenosis.

Pathophysiology

The primary determinant of disease severity in patients with aortic stenosis (AS) is the degree of obstruction to left ventricular (LV) outflow. The degree of valve obstruction leads to secondary effects on the left ventricle, peripheral vasculature, and coronary artery blood flow that impact both the clinical presentation of disease and subsequent outcome. The pathophysiologic mechanisms involved in the initiation and progression of the disease process are described in Chapters 3 and 4.

Valvular Hemodynamics

PRESSURE GRADIENTS

Obstruction at the aortic valve lead results in an increased intraventricular pressure gradient corresponding to the transvalvular pressure gradient between the left ventricle and aorta. For any given transvalvular volume flow rate, both antegrade velocity and transstolic pressure gradient rise with increasing degrees of valvular narrowing. However, for any given valve area, the magnitude of the transvalvular pressure gradient is proportional to the volume flow rate across the valve. Thus, patients with severe stenosis and a low stroke volume have only a moderate increase in antegrade velocity and systolic pressure gradient, whereas those with moderate stenosis and a high transstolic flow rate have a high jet velocity and systolic pressure gradient.

The rate of rise and fall of the antegrade velocity and the timing of the pressure gradient across the valve are also related to disease severity. With mild stenosis, the maximum velocity and maximum pressure difference across the valve occur in early systole, prior to the onset of valve closure. At this time point, coinciding with the maximum rate of flow acceleration,¹ AS stenosis becomes more severe, the maximum velocity and pressure difference occur later in systole, eventually coinciding with the maximum volume flow across the valve. In addition to the temporal sequence, the shape of the velocity curve and timing of the pressure gradient may be affected by other factors that alter LV or aortic pressure, such as coexisting aortic regurgitation (AR) and increased systemic vascular resistance.

The pressure gradient across the valve and the aortic valve is usually described in terms of the maximum instantaneous velocity. The maximum instantaneous velocity relates to the maximum instantaneous pressure gradient across the valve as stated in the Bernoulli equation. This relationship is not always linear, and the relationship can be simplified for most clinical applications so that the pressure gradient is equal to the velocity squared multiplied by 4 (i.e., "simplified Bernoulli equation").^{2,3} At cardiac catheterization, the difference between peak LV and peak aortic pressures (the peak-to-peak gradient) is often reported. Because the peak LV and aortic pressures usually are not simultaneous, the difference between these two pressures is not a physical measurement and does not correspond to the mean pressure or any other instantaneous velocity obtained with Doppler echocardiography.

Mean transstolic pressure gradients can be derived from Doppler echocardiographic data or invasive pressure recordings across the aortic valve. The relationship between the systolic pressure gradient and the mean pressure gradient is linearly related, with a close correlation.⁴ The predictive value of mean gradient is also well established for the prediction of future events, and this measurement should be included in diagnostic reports.

The phenomenon of pressure recovery distal to the stenotic valve contributes to some of the confusion surrounding comparisons of invasively and noninvasively measured gradients. The Doppler velocities reflect the pressure drop in the orifice itself, whereas catheter pressure data may include pressure recovery distal to the orifice, depending on the exact location of the catheter relative to the stenotic orifice. The effect of the flow obstruction on AS is that as the area widens away from the stenotic orifice to a comparatively large ascending aorta causes extensive turbulence with dissipation of kinetic energy into heat. This pattern precludes the occurrence of pressure recovery with clinically relevant magnitudes in the majority of patients. Only in the case of a small aorta with a favorable

139

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All ▾ Search ClinicalKey for ...

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Browse Books

Find by Title 

AAOS Atlas of Orthoses and Assistive Devices

Abdominal Imaging

Abeloff's Clinical Oncology

Abernathy's Surgical Secrets

Accident and Emergency Radiology: A Survival Guide

Specialties

| | |
|--------------------------------------|----|
| Advanced Basic Science | 17 |
| Allergy and Immunology | 13 |
| Anesthesiology | 52 |
| Cardiovascular Disease | 70 |
| Critical Care Medicine | 17 |
| Dentistry | 17 |
| Dermatology | 44 |
| Emergency Medicine | 24 |
| Endocrinology, Diabet... <td>21</td> | 21 |
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Books Journals More ▾

Alfonso Macias ▾

All ▾

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Copyright

Dedication

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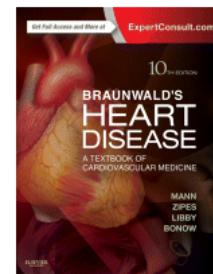
Preface to the Tenth Edition

Preface?Adapted from the First Edition

Video Contents

Look for these other titles in the Braunwald's Heart Disease Family

1. Global Burden of Cardiovascular Disease
2. Heart Disease in Varied Populations
3. Ethics in Cardiovascular Medicine
4. Clinical Decision Making in Cardiology



Braunwald's Heart Disease: A Textbook of Cardiovascular Medicine, Tenth Edition

Mann, Douglas L., MD

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Help & Feedback



ELSEVIER

Posibilidad de hacer búsquedas en el libro o capítulo

The screenshot shows the ClinicalKey search interface. At the top, there is a navigation bar with links for Books, Journals, More, and a user profile for Alfonso Macias. Below the navigation bar is a search bar containing the word "obesity". A blue arrow points from the left towards the search bar. To the left of the search bar is a sidebar with a dropdown menu set to "This Book" and a list of other resources: All, Journals, Books, Clinical Trials, Drug Monographs, Guidelines, Patient Education, First Consult, MEDLINE, Multimedia, and Procedures Consult. At the bottom of the sidebar, there are links for Contributors and Preface to the Tenth Edition. In the center of the page, the title of the book "Kapoor's Heart Disease: A Textbook of Cardiac Medicine, Tenth Edition" is displayed, along with the publication information "2005, 2001, 1997, 1992, 1988, 1984, 1980 by Saunders, an imprint of Elsevier Inc." At the bottom right, there is a "Help & Feedback" button with a speech bubble icon.

Y obtener resultados efectivos

ClinicalKey®

This Book ▾ obesity 

Filter By:

1 49 results 

Subscribed Content

BOOK CHAPTER

Risk Markers and the Primary Prevention of Cardiovascular Disease

Braunwald's Heart Disease: A Textbook of Cardiovascular Medicine.

Ridker, Paul M; Libby, Peter; Buring, Julie E.. Published December 31, 2014. Pages 891-933. © 2015. 

Journals, Texto Completo, 610+ Todas las Especialidades

ClinicalKey®

Books Journals More ▾

Alfonso Macias ▾

This Book ▾

obesity



Filter By: Specialties

| Specialties | |
|---------------------------|----|
| Advanced Basic Science | 20 |
| Allergy and Immunology | 21 |
| Anesthesiology | 15 |
| Cardiothoracic Surgery | 5 |
| Cardiovascular Disease | 44 |
| Critical Care Medicine | 11 |
| Dentistry | 14 |
| Dermatology | 6 |
| Emergency Medicine | 11 |
| Endocrinology, Diabete... | 30 |



Bro

Find by

Sub

Acade

Acade

Addic

Advances in Anesthesia

Featured Journals

THE LANCET Lancet, The

"Social evidence is conflict does not happen in isolation, but is one form of social interaction that can lead to social evidence that is particularly persuasive against women and girls."



Medical Engineering and Physics



Help & Feedback

ELSEVIER

Posibilidad de hacer búsquedas directamente en el Journal o Artículo

The screenshot shows the ClinicalKey interface. At the top, the ClinicalKey logo is displayed. Below it, a search bar contains the text "This Journal" followed by a dropdown arrow and the search term "obesity infarct". A blue arrow points from the text "obesity infarct" towards the search icon. To the right of the search bar is a magnifying glass icon inside a square frame. The main content area displays "The Lancet" journal information, including its logo, "Current Issue" (2014-8-29, Volume 384, Issue 9945), and a section titled "Journal Volumes" with links to various volumes.

Lancet, The

Current Issue
2014-8-29, Volume 384,
Issue 9945

Journal Volumes:

- > Articles in Press
- > Volume 384 (2014)
- > Volume 383 (2014)
- > Volume 382 (2013)
- > Volume 381 (2013)
- > Volume 380 (2012)

Y Obtener resultados efectivos

The screenshot shows the ClinicalKey search interface. At the top, the search bar contains the query "obesity infarct". Below the search bar are filter options: "Filter By: Source Type" and "Date". A blue arrow points to the "15 results" link. To the right, it says "Sort by: Relevance". The search results list two articles:

- FULL TEXT ARTICLE**
Diabetes and cognitive dysfunction
Lancet, The.
McCrimmon, Rory J, Dr; Ryan, Christopher M, Prof; Frier, Brian M, Prof. Published June 15, 2012. Volume 379, Issue 9833. Pages 2291-2299. © 2012.
- FULL TEXT ARTICLE**
Management of type 2 diabetes: new and future developments in treatment
Lancet, The.

Lista de Lectura

Lista de Lectura con Etiquetas

ClinicalKey® Books

All ▾ obesity infarct 

Saved



21 items in Saved

Sort by: Date Added ▾

My Tags

Obesity Infarct

JOURNAL

A Systematic Review of the Association Between Erectile Dysfunction and Cardiovascular Disease

European Urology.

Gandaglia, Giorgio; Briganti, Alberto; Jackson, Graham... [Show all](#). Published April 30, 2014.**Obesity Infarct**  [+ Add/Edit Tags](#)

JOURNAL

Personality as a risk factor for the metabolic syndrome: A systematic review

Journal of Psychosomatic Research.

Mommersteeg, Paula M.C.; Pouwer, François. Published October 31, 2012.

Guardar y Etiquetar Búsqueda

ClinicalKey®

All obesity infarct

Filter By: Source Type Specialties Date

Books Cardiovasc...

6 8 results

Subscribed Content

BOOK CHAPTER

Ventricular Tachycardias in Arrhythmias
Ventricular Dysplasia/Cardiomyopathy

Cardiac Electrophysiology: From Cell to Bedside.
Tandri, Harikrishna; Calkins, Hugh. Published January 1, 2014. Pages 885-

BOOK CHAPTER

Exercise and the Heart

Cardiology Secrets.
Awtry, Eric H., MD; Balady, Gary J., MD. Published January 1, 2014. Pages 323-328. © 2014.

BOOK CHAPTER

Epidemiology of Valvular Heart Disease

Items Saved

Add Tag

Current Tags: 

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Alfonso Macias ▾

All ▾

obesity infarct



Saved

5

21 items in Saved

 JOURNAL

A Systematic Review of the Association Between Erectile Dysfunction and Cardiovascular Disease

European Urology.

Gandaglia, Giorgio; Briganti, Alberto; Jackson, Graham... Show all. Published

Obesity Infarct x + Add/Edit Tags

 JOURNAL

Personality as a risk factor for the metabolic syndrome. A systematic review

Journal of Psychosomatic Research.

Mommersteeg, Paula M.C.; Pouwer, François. Published October 31, 2012.

Email

From: a.macias@elsevier.com Change

h.loboal@elsevier.com

alfmactor@yahoo.com

Leer para próxima clase

- ⌘ Full Text Article: A Systematic Review of the Association Between Erectile Dysfunction and Cardiovascular Disease - European Urology
- ⌘ Full Text Article: Personality as a risk factor for

Cancel

Send

My Tags

Edit Tags

Obesity Infarct



Help & Feedback

ELSEVIER

Email con enlaces a las lecturas seleccionadas

De: clinicalkey@elsevier.com
Para: Macias, Alfonso (ELS-CON)
CC:
Asunto: Artículo(s) de ClinicalKey

Patient Jose Luis Palafox, Pancreatitis

[Acute pancreatitis in obese patients](#) [Journal]
Chooklin, Serge, Shavarova, Mariya
Pancreatology, 2013-05-01 , Volume 13, Issue 3, Supplement, Pages S32-S32
Copyright © 2013

[New features in the treatment of patients with chronic pancreatitis on the background of obesity](#) [Journal]
Gubergrits, Natalya, Bondarenko, Olha
Pancreatology, 2013-05-01 , Volume 13, Issue 3, Supplement, Pages S37-S37
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[A Systematic Review of the Association Between Erectile Dysfunction and Cardiovascular Disease](#) [Journal]
Gandaglia, Giorgio, Briganti, Alberto, Jackson, Graham, Kloner, Robert A., Montorsi, Francesco, Montorsi, I...
European Urology, 2014-05-01 , Volume 65, Issue 5, Pages 968-978
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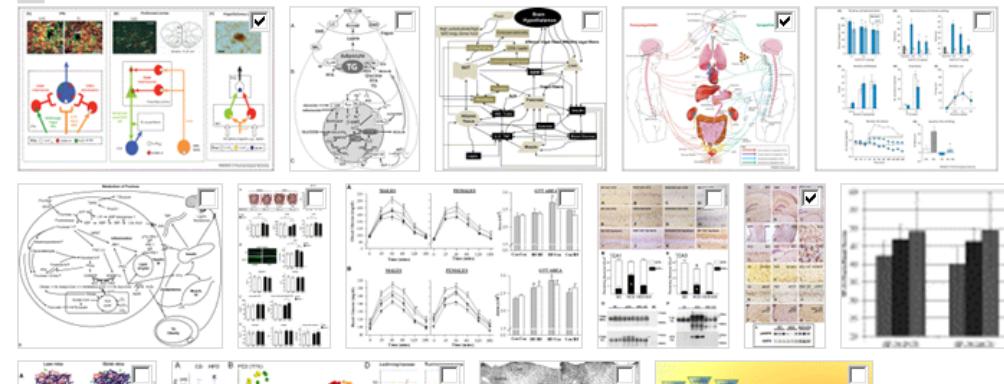
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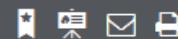
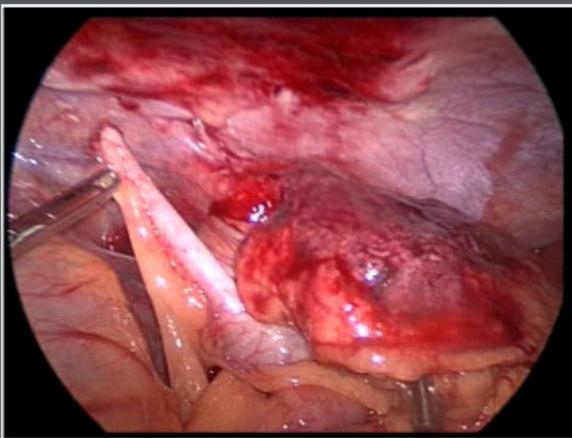
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Journal of Pediatric Surgery.

Nubi, Ayodeji; McBride, Whitney; Stringel, Gustavo. Published May 1, 2009. Published April 30, 2009. Volume 44, Issue 5. Pages 953-956. © 2009.

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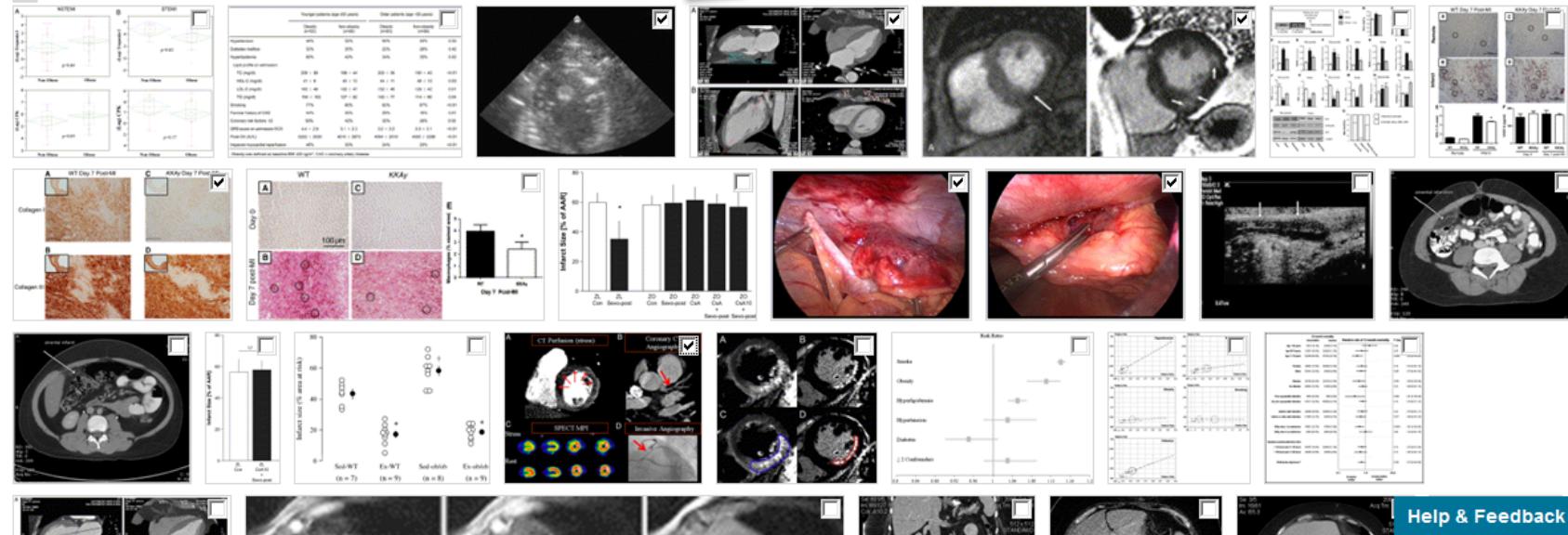
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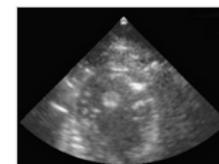
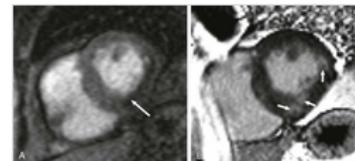
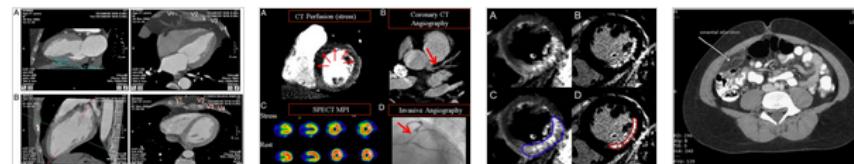
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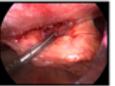
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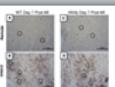
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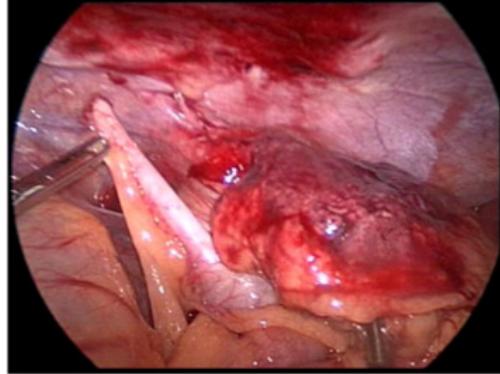
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Infarcted omentum and normal appendix.

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Nubi, Ayodeji, Journal of Pediatric Surgery, Volume 44, Issue 5, 953-956

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Obesity in adults

Michele Hoenig, MD. Published March 24, 2014. Last updated March 23, 2014.

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Obesity in children

Jennifer K. Yee, MD; Carol Berkowitz, MD. Published May 10, 2012. Last updated May 6, 2012.

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Key points

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Screening

Summary approach

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Screening modalities

Primary prevention

Summary approach

Population at risk

Preventive measures

Diagnosis

FIRST CONSULT

Obesity in adults



Revised: March 23, 2014

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Key points

- Obesity is a complex and multifactorial condition characterized by an excess of body fat that can present in isolation, with no symptoms, or in association with considerable comorbidities, in particular, cancer, coronary artery disease, diabetes, hypertension, gout, obstructive sleep apnea, and osteoarthritis
- More than 300 million people worldwide are estimated to be obese. Approximately 66% of the U.S. population is classified as overweight, with an additional 33% classified as obese
- The current diagnosis of obesity is defined by the calculation of body mass index (BMI) or mass divided by height squared. Obesity is defined in practice as a BMI $\geq 30 \text{ kg/m}^2$
- Other easily obtainable measurements to establish obesity include waist-to-hip ratio and waist circumference. Central or abdominal obesity has a stronger association with obesity-related comorbidities than peripheral obesity, so waist circumference greater than 102 cm (40 in) in men

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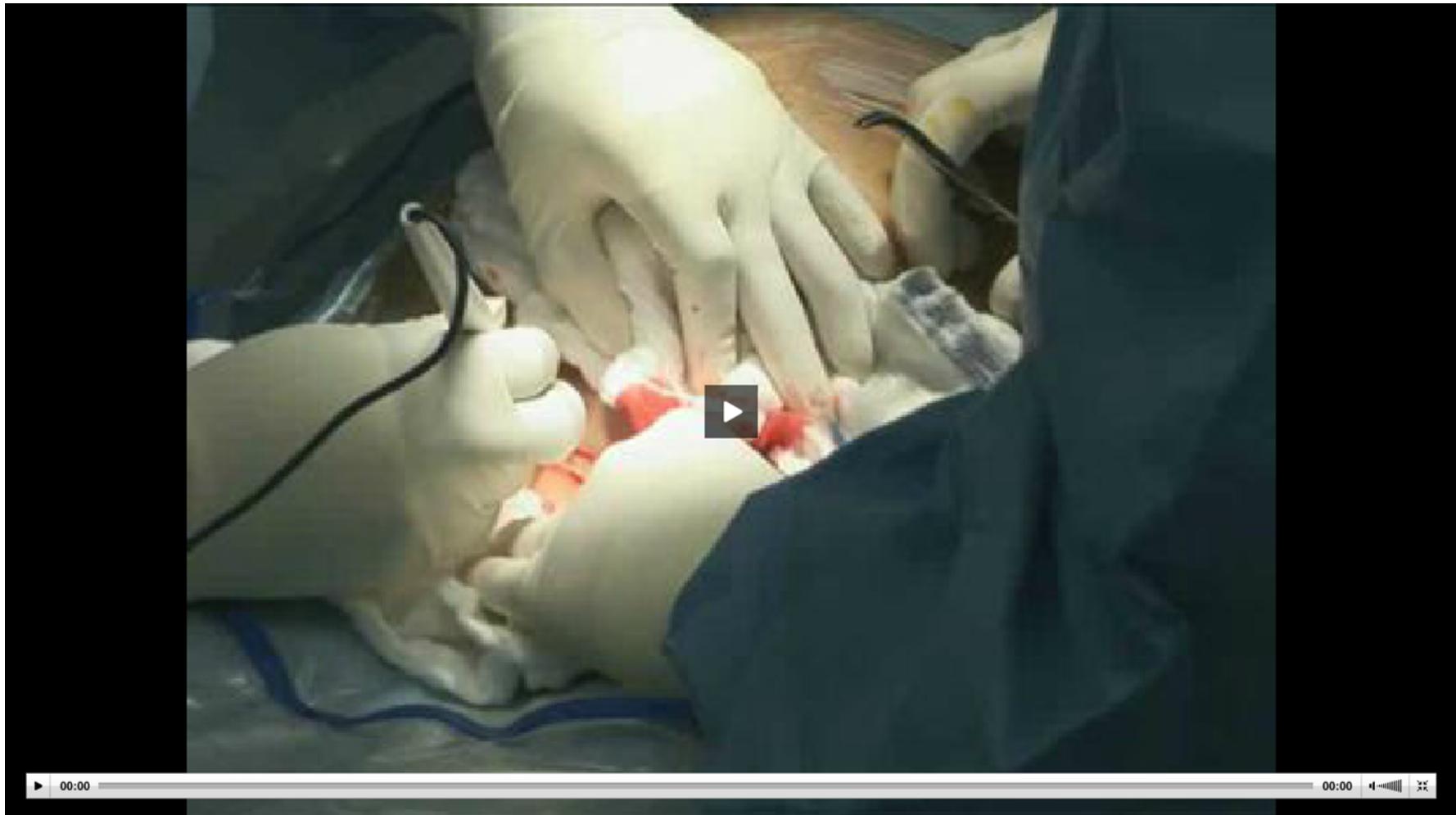
The New England journal of medicine.

Ludwig, Jens; Sanbonmatsu, Lisa; Gennetian, Lisa... [Show all](#). Published October 20, 2011.

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PATIENT EDUCATION

Obesidad (Obesity)

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Last revised: February 14, 2014

Se considera obesidad cuando hay demasiada grasa corporal y el índice de masa corporal (IMC) es de 30 o más. El IMC es la estimación de la grasa corporal y se calcula a partir de la altura y el peso. La obesidad se produce cuando se consumen más calorías de las que se gastan realizando ejercicios o actividad física todos los días. Cuando la obesidad es prolongada, puede causar enfermedades graves o emergencias, como:

- Un ictus.
- Enfermedades cardíacas.



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FULL DETAILS

PRE-PROCEDURE

Introduction

See Figure



Figure 1 In

Transvenous
compromis
acutely imp

PROCEDURE

Clinical P

The follo
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Expl

- If t
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• Obtain a chest radiograph

- Assess for proper placement of the pacing wire in the right ventricular apex.

- Assess for any complications related to central line insertion (e.g., pneumothorax).

• Obtain a 12-lead electrocardiogram

- The electrocardiogram should show captured pacer spikes before every QRS.

- The QRS should be in a left BBB pattern.

- Right BBB morphologies suggest either coronary sinus pacing or septal perforation.¹¹

Checklist

- Explain the procedure and obtain consent.
- Observe universal precautions and use sterile technique.
- Prepare resuscitation equipment.
- Establish a right internal jugular (preferred) or left subclavian central line.
- Attach the sterile sleeve of the pacer catheter to the sheath introducer.
- Check the balloon on the catheter then insert the pacing catheter into the sheath introducer.

FULL DETAILS

PRE-PROCEDURE

Introduction

See Figure



Figure 1 In

Transvenous
compromis
acutely imp

PROCEDURE

Clinical P

The follo
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Expl

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Central Venous Catheterization: Subclavian Approach (Internal Medicine) : Enlarged V...

http://app.proceduresconsult.com/Learner/projects/largeplayer/largeplayer.aspx?ProcedureId=3

06:16 / 14:19

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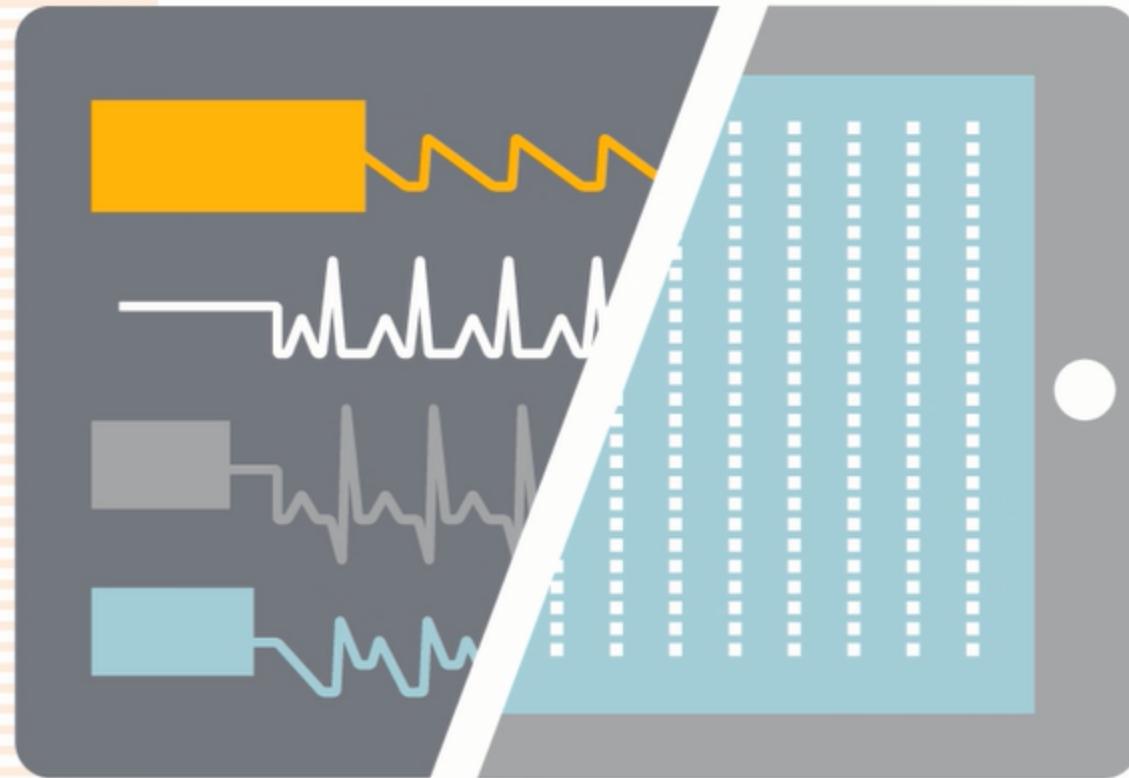
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2. The Seldinger Technique
3. Anatomy

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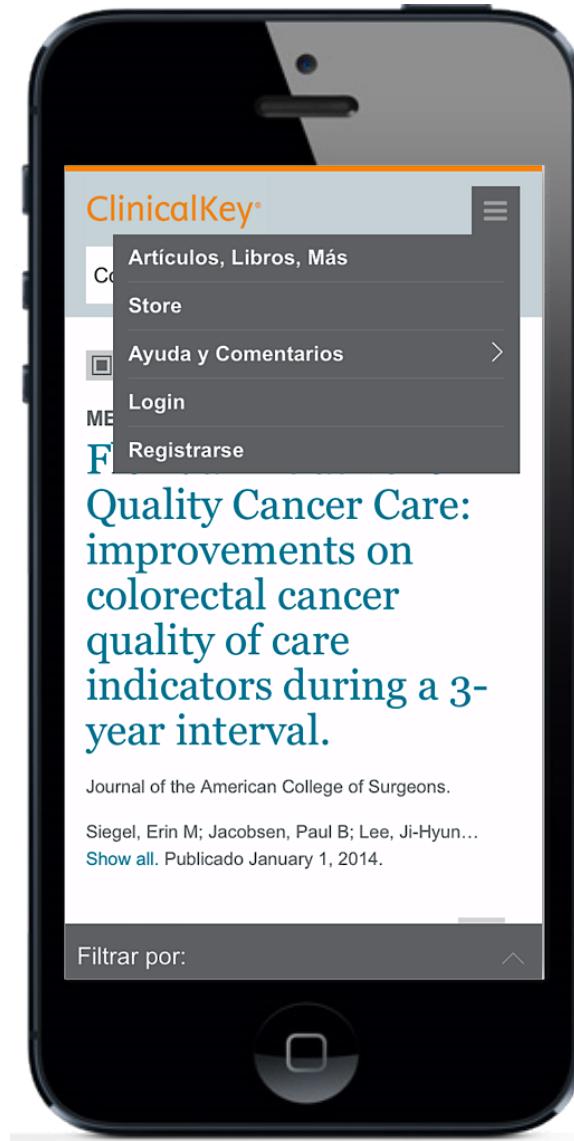
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¡Gracias!

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