## FOUNDATIONS OF PATHOPHYSIOLOGY

(CHAPTER 1)

# **QUESTION 1**

Compare pathology with pathophysiology. Give an example of each. How are they used?

páthos (disease)

-logía (study)

## **PATHOLOGY**

"the study of disease"

phúsis (nature)

-logía (study)

## **PHYSIOLOGY**

"the study of our nature"

páthos (disease)phusiología (physiology)

## **PATHOPHYSIOLOGY**

"the study of our nature under the effects of disease"

#### **PATHOLOGY**

Usually concerned with examining diseased **cells and tissues** for diagnostic purposes

#### **PATHOPHYSIOLOGY**

Studies disease **processes** to understand how diseases affect the human body

# QUESTION 2

How is the concept of homeostasis used in health and disease? Give some examples.

hómoios (same) stásis (state)

# HOMEOSTASIS

"steady state; equilibrium"

**állos** (other) **stásis** (state)

## **ALLOSTASIS**

"the **processes** or **forces** pushing the body towards equilibrium"

## WHY IS THIS IMPORTANT?

Disease in general is a loss of homeostasis.

external force > allostatic overload > loss of homeostasis

Type 1 diabetes mellitus

**Insulin** and **glucagon** are responsible for maintaning blood glucose homeostasis

span class="fragment fade-up">damage to pancreasspan class="fragment fade-up"> → insufficient insulinspan class="fragment fade-up"> → elevated blood glucose

# **QUESTION 3**

Define etiology, etiologic agent, pathogenesis, and pathogen.

aitía (cause)

**lógos** (explanation)

## **ETIOLOGY**

"an explanation of why a disease occurs; the root cause"

etiologic agent – any external influence that causes a disease

páthos (disease)

**-genés** (born from)

## **PATHOGEN**

"an organism or substance capable of causing disease" (usually a microorganism)

páthos (disease)

**génesis** (origin)

## **PATHOGENESIS**

"the origin and development of a disease"

# **QUESTION 4**

Compare acute and chronic disease. Give examples of each.

## acute – from Latin acūtus (sharp)

- Lasts less than 3 months (usually 2 weeks or less)
- Quickly worsens → steadily improves

## **chronic** – from Greek **khronikós** ("of time")

- Lasts more than 3 months (often lifelong)
- Can remain at a constant severity indefinitely

influenza -acute

hypertension -chronic

emphysema -chronic

strep throat -acute

myocardial infarction -acute

diabetes mellitus -chronic

## **QUESTION 5**

Give an example of prevention and intervention. Compare primary, secondary, and tertiary prevention. **prevention** – prevent something bad from happening, or prevent it from being worse than it needs to be

intervention - intervene in (directly treat) a disease process that is already underway

# **primary** prevention – prevent a disease from ever occurring in the first place

e.g. vaccinationspan class="fragment fade-up">, educationspan class="fragment fade-up">, risk mitigation

# **secondary** prevention – limit the damage of an already existing disease

e.g. screeningspan class="fragment fade-up">, early detectionspan class="fragment fade-up">, risk management

**tertiary** prevention – prevent a **chronic** disease from interfering with life

e.g. rehabilitationspan class="fragment fade-up">, physical therapyspan class="fragment fade-up">, support groups

A 65-year-old male patient receives a routine colonoscopy to screen for colorectal cancer

**SECONDARY** prevention!

(Remember Screening is Secondary!)

A 20-year-old cigarette smoker is educated on strategies for smoking cessation to prevent lung cancer

**PRIMARY** prevention!

An 18-year-old patient newly diagnosed with type 1 diabetes mellitus is referred to a support group for diabetes patients

**TERTIARY** prevention!

A 2-year-old patient receives a DTaP vaccination to prevent infectious illness

**PRIMARY** prevention!

### **EXAMPLE**

A 24-year-old female patient receives a pap smear during a well-woman exam to assess for risk of cervical cancer

**SECONDARY** prevention!

### **EXAMPLE**

A 72-year-old male patient suffering a myocardial infarction receives an intravenous morphine drip for persistent chest pain

Trick question, this is an **intervention**!



# QUESTION 6

Define symptom, sign, and syndrome.

# symptom – subjective evidence of disease reported by the patient

**sign** – an objective **clinical observation** or measurement pointing to disease

sun- (with, together)
drómos (running)

### **SYNDROME**

"a set of **correlated signs and symptoms** that point to a single underlying disease process"

### A syndrome can be linked to:

a specific etiology

(e.g. effects of trisomy 21 referred to as "Down syndrome")

a range of etiologies

(e.g. "toxic shock syndrome" caused by many pathogens)

an unkwown etiology

(e.g. "irritable bowel syndrome" is idiopathic but recognizable)

# QUESTION 7

Describe the process of differential diagnosis.

# Based on the scientific method, often utilizing process of elimination

hypothesisspan class="fragment fade-up"> → experimentspan class="fragment fade-up"> → conclusion

"What are all the things it **could** be, and what do we need to do to rule out everything it's **not**?"

# QUESTION 8

How is idiopathic etiology different from iatrogenic etiology?

Remember from earlier...

## **ETIOLOGY**

"an explanation of why a disease occurs; the root cause"

idios (separate, individual)
 páthos (disease)

## **IDIOPATHIC**

"having an unknown or poorly-understood etiology, distinct from other possible causes"

(e.g. idiopathic thrombocytopenic purpura, essential tremor)

iatrós (healer)

-genés (born from)

## **IATROGENIC**

"caused by or during the treatment of another condition"

(e.g. MRSA, hospital-acquired pneumonia)

Another good word to know: **nosocomial**Like **iatrogenic**, but specifically **hospital**-related

## **QUESTION 9**

Palliative relief is defined as ..., while the definition of prognosis would be...

pallium (cloak)

## **PALLIATIVE**

"seeking to 'cover up' symptoms rather than treating the root disease"

pro- (before)
gnôsis (knowledge)

## **PROGNOSIS**

"evidence-based estimate of the future course/progression of a disease"

# QUESTION 10

Compare latent period with prodromal period.

Describe the acute phase.

latent periodspan class="fragment fade-up"> → prodromal periodspan class="fragment fade-up"> → acute phase

# latent period – completely fine, no signs or symptoms at all... but already infected

"Ew, that guy coughed on me... I hope I don't get sick."

**prodromal period** – general, non-specific symptoms begin (fever, fatigue, malaise, generalized myalgias)

"Great, I think I'm coming down with something..."

# **acute phase** – full-blown illness with the typical, specific symptoms of the disease

"Well, looks like I've got the flu."

# QUESTION 11

Define exacerbation, remission, convalescence, and sequela.

### Exacerbation vs. Sequela

An **exacerbation** is an **acute** worsening of a **chronic** problem.

Think of an asthma attack, a lupus flare, or a new worsening of chronic back pain.

### Exacerbation vs. Sequela

A **sequela** is a long-term, **chronic** problem caused by an **acute** injury.

Think of chronic leg pain from an old fracture, chest pain after being in a car crash, or long-term surgical complications.

#### Convalescence vs. Remission

**Convalescence** is gradual process of recovery from a disease or injury, usually **acute** in nature.

Think of slowly getting better after having the flu for a week, or starting to walk again after a broken leg.

#### Convalescence vs. Remission

**Remission** is a partial or full recovery from **symptoms** of a **chronic disease**. The patient may become asymptomatic, but the underlying disease remains.

Think of a cancer patient after successful chemotherapy, or an HIV patient with undetectable viral load.

# **QUESTION 12**

Clinical tests should display which characteristics when developed for use in patients?

**Predictive value** – How well do the test results correlate with presence/absence of disease?

**Sensitivity** – How well does the test correctly identify **true positives**?

**Specificity** – How well does the test correctly identify **true negatives**?

**Reliability** – Can results be reproduced consistently? Does a patient who tested positive once always test positive?

**Validity** – Is the test detecting what we're actually trying to detect, and not something else?

## **QUESTION 13**

Define epidemiology, endemic disease, epidemic disease, and pandemic disease.

en- (in)
dêmos (people)

## **ENDEMIC**

"spread out **at a constant level** within a specific population"

epí– (upon)
dêmos (people)

## **EPIDEMIC**

"a **focused outbreak** of a disease in a particular location"

pan- (all)dêmos (people)

## **PANDEMIC**

"a widespread outbreak spanning countries, continents, or the entire world"

epidemia (epidemic)

-logía (study)

## **EPIDEMIOLOGY**

"the study of the **patterns** of disease transmission and spread"

# **QUESTION 14**

What are the three leading causes of death in the United States? What is the value of collecting these statistics?

#### 1. Heart disease

2. Cancer (malignant neoplasm)

3. Accidents

### **WHY CARE?**

- Helps us understand the greatest health risks
- Guides prevention and intervention efforts