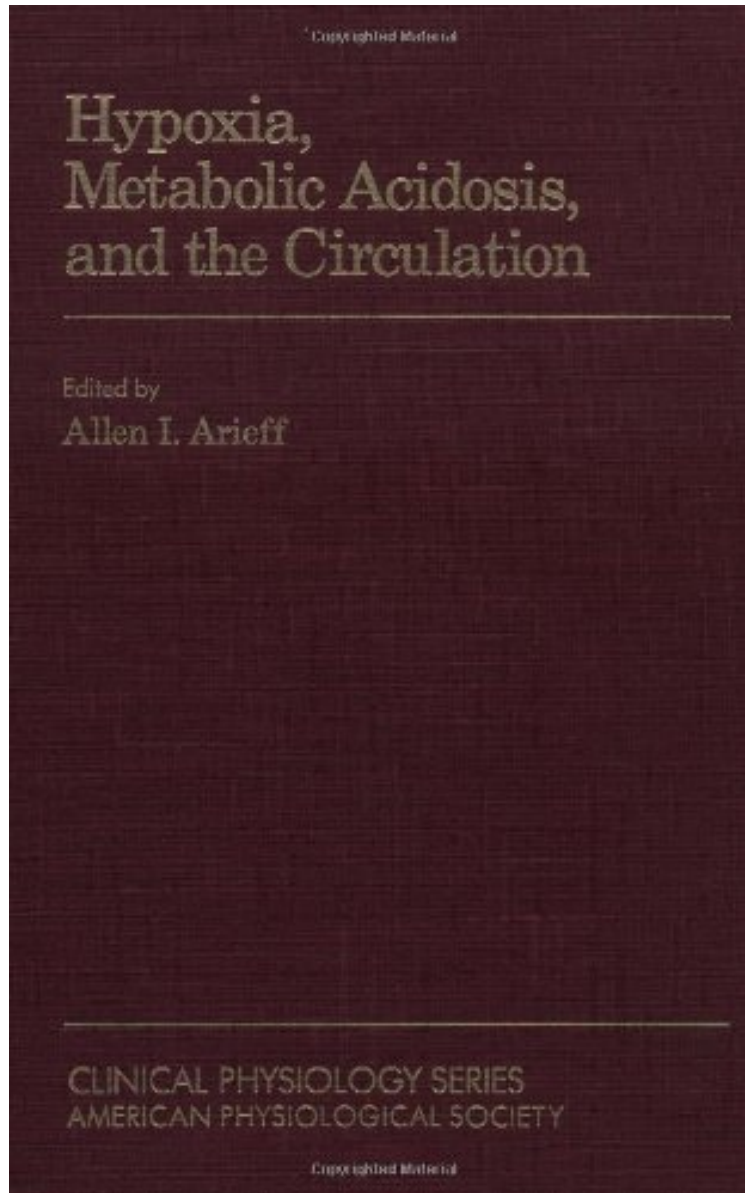


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Hypoxia, Metabolic Acidosis, and the Circulation (Clinical Physiology Series)

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From Oxford University Press : Hypoxia, Metabolic Acidosis, and the Circulation (Clinical Physiology Series) before purchasing it in order to gage whether or not it would be worth my time, and all praised Hypoxia, Metabolic Acidosis, and the Circulation (Clinical Physiology Series):

2 of 6 people found the following review helpful. A brilliant work-- will change face of modern fiction!By Ben BreenMr. Arieff's brilliant "Hypoxia, Metabolic Acidosis, and the Circulation" combines innovative story-telling with realistic, gritty dialogue. His detailed plot themes and varied characters make the book one of the most enjoyable and modern books since Conrads "Heart of Darkness."

In recent years, there has been a wealth of new information on the physiological and biochemical consequences of hypoxia, or low blood levels of oxygen. This new volume discusses the implications of these new findings on the pathophysiology, development, and treatment of hypoxic metabolic acidosis. The volume is part of the Clinical Physiology series sponsored by the American Physiological Society, and is based on a FASEB symposium held in May 1988. Hypoxia was once thought to affect organs in a similar manner, but it is now known that each is affected differently. The author shows how hypoxia and metabolic acidosis affect the heart, lungs, blood vessels and other organs at the cellular level, the tissue level, and finally, at the level of the entire organ. The book then proceeds to a description of the situations in which hypoxic metabolic acidosis develops, such as during high altitude exposure, cardiac arrest, and lactic acidosis. The last few chapters give an overview of treatment. Traditional therapy has consisted largely of the intravenous administration of sodium bicarbonate. This method has come under increasing scrutiny however, and the range of problems associated with the use of sodium bicarbonate is examined fully. Newer alternative agents for managing hypoxic acidosis are reviewed as well. This up-to-date review of hypoxia and metabolic acidosis should be of interest to physiologists, internists, cardiologists, chest physicians, anesthesiologists, and intensive care specialists.

"The reviews are as usual exhaustive and authoritative. This volume will be a welcome addition to the shelves of departmental libraries." --British Journal of Anesthesia
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