CEREBRAL VASCULAR ACCIDENT

A MEDICAL DICTIONARY, BIBLIOGRAPHY, AND ANNOTATED RESEARCH GUIDE TO INTERNET REFERENCES



JAMES N. PARKER, M.D. AND PHILIP M. PARKER, PH.D., EDITORS ICON Health Publications ICON Group International, Inc. 4370 La Jolla Village Drive, 4th Floor San Diego, CA 92122 USA

Copyright ©2004 by ICON Group International, Inc.

Copyright ©2004 by ICON Group International, Inc. All rights reserved. This book is protected by copyright. No part of it may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without written permission from the publisher.

Printed in the United States of America.

Last digit indicates print number: 10987645321

Publisher, Health Care: Philip Parker, Ph.D. Editor(s): James Parker, M.D., Philip Parker, Ph.D.

Publisher's note: The ideas, procedures, and suggestions contained in this book are not intended for the diagnosis or treatment of a health problem. As new medical or scientific information becomes available from academic and clinical research, recommended treatments and drug therapies may undergo changes. The authors, editors, and publisher have attempted to make the information in this book up to date and accurate in accord with accepted standards at the time of publication. The authors, editors, and publisher are not responsible for errors or omissions or for consequences from application of the book, and make no warranty, expressed or implied, in regard to the contents of this book. Any practice described in this book should be applied by the reader in accordance with professional standards of care used in regard to the unique circumstances that may apply in each situation. The reader is advised to always check product information (package inserts) for changes and new information regarding dosage and contraindications before prescribing any drug or pharmacological product. Caution is especially urged when using new or infrequently ordered drugs, herbal remedies, vitamins and supplements, alternative therapies, complementary therapies and medicines, and integrative medical treatments.

Cataloging-in-Publication Data

Parker, James N., 1961-Parker, Philip M., 1960-

Cerebral Vascular Accident: A Medical Dictionary, Bibliography, and Annotated Research Guide to Internet References / James N. Parker and Philip M. Parker, editors

p. cm. Includes bibliographical references, glossary, and index. ISBN: 0-497-00212-4 1. Cerebral Vascular Accident-Popular works. I. Title.

Disclaimer

This publication is not intended to be used for the diagnosis or treatment of a health problem. It is sold with the understanding that the publisher, editors, and authors are not engaging in the rendering of medical, psychological, financial, legal, or other professional services.

References to any entity, product, service, or source of information that may be contained in this publication should not be considered an endorsement, either direct or implied, by the publisher, editors, or authors. ICON Group International, Inc., the editors, and the authors are not responsible for the content of any Web pages or publications referenced in this publication.

Copyright Notice

If a physician wishes to copy limited passages from this book for patient use, this right is automatically granted without written permission from ICON Group International, Inc. (ICON Group). However, all of ICON Group publications have copyrights. With exception to the above, copying our publications in whole or in part, for whatever reason, is a violation of copyright laws and can lead to penalties and fines. Should you want to copy tables, graphs, or other materials, please contact us to request permission (E-mail: iconedit@san.rr.com). ICON Group often grants permission for very limited reproduction of our publications for internal use, press releases, and academic research. Such reproduction requires confirmed permission from ICON Group International, Inc. **The disclaimer above must accompany all reproductions, in whole or in part, of this book.**

Acknowledgements

The collective knowledge generated from academic and applied research summarized in various references has been critical in the creation of this book which is best viewed as a comprehensive compilation and collection of information prepared by various official agencies which produce publications on cerebral vascular accident. Books in this series draw from various agencies and institutions associated with the United States Department of Health and Human Services, and in particular, the Office of the Secretary of Health and Human Services (OS), the Administration for Children and Families (ACF), the Administration on Aging (AOA), the Agency for Healthcare Research and Quality (AHRQ), the Agency for Toxic Substances and Disease Registry (ATSDR), the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), the Healthcare Financing Administration (HCFA), the Health Resources and Services Administration (HRSA), the Indian Health Service (IHS), the institutions of the National Institutes of Health (NIH), the Program Support Center (PSC), and the Substance Abuse and Mental Health Services Administration (SAMHSA). In addition to these sources, information gathered from the National Library of Medicine, the United States Patent Office, the European Union, and their related organizations has been invaluable in the creation of this book. Some of the work represented was financially supported by the Research and Development Committee at INSEAD. This support is gratefully acknowledged. Finally, special thanks are owed to Tiffany Freeman for her excellent editorial support.

About the Editors

James N. Parker, M.D.

Dr. James N. Parker received his Bachelor of Science degree in Psychobiology from the University of California, Riverside and his M.D. from the University of California, San Diego. In addition to authoring numerous research publications, he has lectured at various academic institutions. Dr. Parker is the medical editor for health books by ICON Health Publications.

Philip M. Parker, Ph.D.

Philip M. Parker is the Eli Lilly Chair Professor of Innovation, Business and Society at INSEAD (Fontainebleau, France and Singapore). Dr. Parker has also been Professor at the University of California, San Diego and has taught courses at Harvard University, the Hong Kong University of Science and Technology, the Massachusetts Institute of Technology, Stanford University, and UCLA. Dr. Parker is the associate editor for ICON Health Publications.

About ICON Health Publications

To discover more about ICON Health Publications, simply check with your preferred online booksellers, including Barnes&Noble.com and Amazon.com which currently carry all of our titles. Or, feel free to contact us directly for bulk purchases or institutional discounts:

ICON Group International, Inc. 4370 La Jolla Village Drive, Fourth Floor San Diego, CA 92122 USA Fax: 858-546-4341 Web site: **www.icongrouponline.com/health**

Table of Contents

Forward	1
CHAPTER 1. STUDIES ON CEREBRAL VASCULAR ACCIDENT	3
Overview	
The Combined Health Information Database	
Federally Funded Research on Cerebral Vascular Accident	
The National Library of Medicine: PubMed	
CHAPTER 2. ALTERNATIVE MEDICINE AND CEREBRAL VASCULAR ACCIDENT	
Overview	
National Center for Complementary and Alternative Medicine	
Additional Web Resources	
General References	
CHAPTER 3. DISSERTATIONS ON CEREBRAL VASCULAR ACCIDENT	
Overview	
Dissertations on Cerebral Vascular Accident	
Keeping Current	
CHAPTER 4. BOOKS ON CEREBRAL VASCULAR ACCIDENT	
Overview	
Chapters on Cerebral Vascular Accident	
APPENDIX A. PHYSICIAN RESOURCES	
Overview	
NIH Guidelines	
NIH Databases	
Other Commercial Databases	
Appendix B. Patient Resources	
Overview	
Patient Guideline Sources	
Finding Associations	
Appendix C. Finding Medical Libraries	
Overview	
Preparation	
Finding a Local Medical Library	
Medical Libraries in the U.S. and Canada	
ONLINE GLOSSARIES	
Online Dictionary Directories	
CEREBRAL VASCULAR ACCIDENT DICTIONARY	
INDEX	

FORWARD

In March 2001, the National Institutes of Health issued the following warning: "The number of Web sites offering health-related resources grows every day. Many sites provide valuable information, while others may have information that is unreliable or misleading."¹ Furthermore, because of the rapid increase in Internet-based information, many hours can be wasted searching, selecting, and printing. Since only the smallest fraction of information dealing with cerebral vascular accident is indexed in search engines, such as **www.google.com** or others, a non-systematic approach to Internet research can be not only time consuming, but also incomplete. This book was created for medical professionals, students, and members of the general public who want to know as much as possible about cerebral vascular accident, using the most advanced research tools available and spending the least amount of time doing so.

In addition to offering a structured and comprehensive bibliography, the pages that follow will tell you where and how to find reliable information covering virtually all topics related to cerebral vascular accident, from the essentials to the most advanced areas of research. Public, academic, government, and peer-reviewed research studies are emphasized. Various abstracts are reproduced to give you some of the latest official information available to date on cerebral vascular accident. Abundant guidance is given on how to obtain free-of-charge primary research results via the Internet. While this book focuses on the field of medicine, when some sources provide access to non-medical information relating to cerebral vascular accident, these are noted in the text.

E-book and electronic versions of this book are fully interactive with each of the Internet sites mentioned (clicking on a hyperlink automatically opens your browser to the site indicated). If you are using the hard copy version of this book, you can access a cited Web site by typing the provided Web address directly into your Internet browser. You may find it useful to refer to synonyms or related terms when accessing these Internet databases. **NOTE:** At the time of publication, the Web addresses were functional. However, some links may fail due to URL address changes, which is a common occurrence on the Internet.

For readers unfamiliar with the Internet, detailed instructions are offered on how to access electronic resources. For readers unfamiliar with medical terminology, a comprehensive glossary is provided. For readers without access to Internet resources, a directory of medical libraries, that have or can locate references cited here, is given. We hope these resources will prove useful to the widest possible audience seeking information on cerebral vascular accident.

The Editors

¹ From the NIH, National Cancer Institute (NCI): http://www.cancer.gov/cancerinfo/ten-things-to-know.

CHAPTER 1. STUDIES ON CEREBRAL VASCULAR ACCIDENT

Overview

In this chapter, we will show you how to locate peer-reviewed references and studies on cerebral vascular accident.

The Combined Health Information Database

The Combined Health Information Database summarizes studies across numerous federal agencies. To limit your investigation to research studies and cerebral vascular accident, you will need to use the advanced search options. First, go to http://chid.nih.gov/index.html. From there, select the "Detailed Search" option (or go directly to that page with the following hyperlink: http://chid.nih.gov/detail/detail.html). The trick in extracting studies is found in the drop boxes at the bottom of the search page where "You may refine your search by." Select the dates and language you prefer, and the format option "Journal Article." At the top of the search form, select the number of records you would like to see (we recommend 100) and check the box to display "whole records." We recommend that you type "cerebral vascular accident" (or synonyms) into the "For these words:" box. Consider using the option "anywhere in record" to make your search as broad as possible. If you want to limit the search to only a particular field, such as the title of the journal, then select this option in the "Search in these fields" drop box. The following is what you can expect from this type of search:

Cerebrovascular Accident

Source: Access. 16(6): 40,42,44-47. July 2002.

Contact: Available from American Dental Hygienists' Association (ADHA). 444 North Michigan Avenue, Chicago, IL 60611. (312) 440-8900. E-mail: mail@adha.net. Website: www.adha.org.

Summary: Cerebrovascular accident (CVA, stroke) is the term used to describe a serious, and often fatal, neurologic event caused by sudden loss of oxygenated blood to an area of the brain that results in a corresponding loss of neurologic function. This disease can lead to significant disability that affects motor, communication, and perception functions. This article provides an overview of CVA, including etiology and

4 Cerebral Vascular Accident

pathogenesis, signs and symptoms, diagnosis, treatment, and prognosis. The authors provide dental hygienists with guidelines for providing oral health care to this patient population. 27 references.

Challenges of Teaching Clients with Cerebrovascular Accidents to Manage Their Diabetes

Source: Diabetes Educator. 20(4): 311-316. July-August 1994.

Contact: Available from American Association of Diabetes Educators. 100 West Monroe, 4th floor, Chicago, IL 60603. (800) 338-3633 or (312) 424-2426. Fax (312) 424-2427.

Summary: This article, written for diabetes educators, reviews the challenges of teaching clients with **cerebrovascular accidents** to manage their diabetes. The authors note that the cognitive, perceptual, communicative, and motor disturbances resulting from **cerebrovascular accidents** present a challenge to the individual's ability to learn and carry out aspects of diabetes care and other personal care activities. The major goal of interventions is to help the individual achieve an optimal level of independence, emotional well-being, and overall quality of life. Specific topics include the meal plan, exercise, hypoglycemic agents, monitoring blood glucose, social situations, and family response. One detailed chart summarizes recommended strategies for working with individuals with left and right **cerebrovascular accident** in the areas of cognitive and self care abilities, communication, education, and family responses. 3 tables. 15 references. (AA-M).

• Depression Syndromes in Patients With Alzheimer's Disease, Parkinson Disease, and Cerebral Vascular Accidents

Source: New Directions for Mental Health Services. Number 57: 79-87. Spring 1993.

Summary: This journal article describes the occurrence of depression syndromes in patients with Alzheimer's disease, Parkinson's disease, and stroke. Depression is a noncognitive symptom of Alzheimer's disease that occurs in 10 to 25 percent of patients, usually in the earlier stages of disease. Making the diagnosis of depression in persons with Alzheimer's disease often requires the involvement of family informants as well as direct examination of the patient. Clinical features that might help distinguish depressed Alzheimer's patients from nondepressed Alzheimer's patients include psychomotor retardation, ideas of worthlessness, recurrent thoughts of death, and early morning waking. In addition, depressed patients have been found to have more severe cognitive and functional impairment compared to nondepressed patients with similar ages of onset and duration of illness. Several studies have demonstrated that depression in Alzheimer's disease responds to the same antidepressant therapies used in the treatment of primary depression. More recent research has identified specific neuropathological abnormalities, including the loss of norepinephrine-containing neurons, that may account for depression in Alzheimer's disease. 13 references.

Federally Funded Research on Cerebral Vascular Accident

The U.S. Government supports a variety of research studies relating to cerebral vascular accident. These studies are tracked by the Office of Extramural Research at the National

Institutes of Health.² CRISP (Computerized Retrieval of Information on Scientific Projects) is a searchable database of federally funded biomedical research projects conducted at universities, hospitals, and other institutions.

Search the CRISP Web site at http://crisp.cit.nih.gov/crisp/crisp_query.generate_screen. You will have the option to perform targeted searches by various criteria, including geography, date, and topics related to cerebral vascular accident.

For most of the studies, the agencies reporting into CRISP provide summaries or abstracts. As opposed to clinical trial research using patients, many federally funded studies use animals or simulated models to explore cerebral vascular accident. The following is typical of the type of information found when searching the CRISP database for cerebral vascular accident:

Project Title: COMPAIRSON OF ACETYLHYDROXAMIC ACID AND DEFEROXAMINE IN IRON LOADED PATIENTS

Principal Investigator & Institution: Pelidis, Mria; Johns Hopkins University 3400 N Charles St Baltimore, Md 21218

Timing: Fiscal Year 2002

Summary: Chronic erythrocyte transfusion therapy is the treatment of choice for certain hereditary anemias such as beta-thalassemia major and Diamond- Blackfan Anemia that is unresponsive to steroids. In addition, chronic transfusion therapy is recommended for patients with sickle cell disease who have experienced a **cerebral vascular accident** (CVA) in order to reduce the risk of recurrent CVA's, which is as high as 80% in untransfused patients. Transfusion therapy is also beneficial for sickle cell patients who suffer from severe, frequent vaso-occlusive crises or acute chest syndromes. This form of therapy has had a tremendous impact on the quality of life of these patients; however, this therapy is associated with many complications including iron overload, transmission of infecious diseases and alloimmunization. Transfusional iron overload is one of the major causes of morbidity & mortality in chronically transfused patients. As the total iron burden rises, iron deposition in the heart, liver, endocrine organs & the skin inevitably leads to organ dysfunction. Cardiac iron overload is the most serious consequence of transfusion therapy & cardiac complications are frequently the cause of death in the third or fourth decades for life of heavily transfused patients.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

The National Library of Medicine: PubMed

One of the quickest and most comprehensive ways to find academic studies in both English and other languages is to use PubMed, maintained by the National Library of Medicine.³ The advantage of PubMed over previously mentioned sources is that it covers a greater

² Healthcare projects are funded by the National Institutes of Health (NIH), Substance Abuse and Mental Health Services (SAMHSA), Health Resources and Services Administration (HRSA), Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDCP), Agency for Healthcare Research and Quality (AHRQ), and Office of Assistant Secretary of Health (OASH).

³ PubMed was developed by the National Center for Biotechnology Information (NCBI) at the National Library of Medicine (NLM) at the National Institutes of Health (NIH). The PubMed database was developed in conjunction with publishers of biomedical literature as a search tool for accessing literature citations and linking to full-text journal articles at Web sites of participating publishers. Publishers that participate in PubMed supply NLM with their citations electronically prior to or at the time of publication.

number of domestic and foreign references. It is also free to use. If the publisher has a Web site that offers full text of its journals, PubMed will provide links to that site, as well as to sites offering other related data. User registration, a subscription fee, or some other type of fee may be required to access the full text of articles in some journals.

To generate your own bibliography of studies dealing with cerebral vascular accident, simply go to the PubMed Web site at **http://www.ncbi.nlm.nih.gov/pubmed**. Type "cerebral vascular accident" (or synonyms) into the search box, and click "Go." The following is the type of output you can expect from PubMed for cerebral vascular accident (hyperlinks lead to article summaries):

- Accessory mitral valve tissue as a cause of left ventricular outflow tract obstruction and probable cause of cerebrovascular accident. Author(s): Cemri M, Ozdemir M, Cengel A. Source: Acta Cardiol. 2002 December; 57(6): 431-3. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12542122
- Acute "spontaneous" subdural hemorrhage. An unusual form of cerebrovascular accident.

Author(s): Talalla A, McKissock W. Source: Neurology. 1971 January; 21(1): 19-25. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5099725

- Acute cerebral vascular accident associated with hyperperfusion. Author(s): Soin JS, Burdine JA. Source: Radiology. 1976 January; 118(1): 109-12. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=1244639
- Acute cerebrovascular accidents with severe ovarian hyperstimulation syndrome. Author(s): El Sadek MM, Amer MK, Fahmy M. Source: Human Reproduction (Oxford, England). 1998 July; 13(7): 1793-5. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9740425
- Amiodarone prevents symptomatic atrial fibrillation and reduces the risk of cerebrovascular accidents and ventricular tachycardia after open heart surgery: results of the Atrial Fibrillation Suppression Trial (AFIST). Author(s): Kluger J, White CM. Source: Cardiac Electrophysiology Review. 2003 June; 7(2): 165-7. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=14618044
- Anesthetic and surgical factors affecting open heart surgery patients leading to cerebrovascular accident--retrospective study at King Khalid University Hospital. Author(s): al-Salti RA, al-Daif A, Fouda MN, Takrouri MS, Naher S, al-Khwsky F.
 Source: Middle East J Anesthesiol. 2001 October; 16(3): 265-73. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11789465

• Antithrombin III activity in cerebrovascular accidents. Author(s): Singh VP, Singh MK, Kumar V, Sinha MK, Dwivedi RC, Rai M, Dube B. Source: J Assoc Physicians India. 2003 March; 51: 268-71. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12839349

- Assessing the driving potential of cerebral vascular accident patients. Author(s): Quigley FL, DeLisa JA. Source: Am J Occup Ther. 1983 July; 37(7): 474-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=6614127
- Atrial mechanical performance following internal and external cardioversion of atrial fibrillation: its relationship to peripheral embolization and acute cerebrovascular accident.

Author(s): Dunn MI, Marcum JL. Source: Chest. 2002 January; 121(1): 1-3. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11796419

- Atypical antipsychotics and risk of cerebrovascular accidents. Author(s): Herrmann N, Mamdani M, Lanctot KL. Source: The American Journal of Psychiatry. 2004 June; 161(6): 1113-5. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=15169702
- Basilar artery migraine or cerebral vascular accident?
 Author(s): Fudala RD.
 Source: Journal of Manipulative and Physiological Therapeutics. 1993 June; 16(5): 354-5.
 http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=8345321
- Basilar artery migraine or cerebral vascular accident? Author(s): Cashley MA. Source: Journal of Manipulative and Physiological Therapeutics. 1993 February; 16(2): 112-4. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=8445353
- Bilateral cerebrovascular accidents in incontinentia pigmenti. Author(s): Fiorillo L, Sinclair DB, O'Byrne ML, Krol AL. Source: Pediatric Neurology. 2003 July; 29(1): 66-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=13679126
- Bilateral hand performance with divided attention after a cerebral vascular accident. Author(s): Dittmar CM, Gliner JA. Source: Am J Occup Ther. 1987 February; 41(2): 96-101. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=3565531

• Biometeorologic studies on cerebrovascular diseases. 3. Effects by the combination of meteorologic changeson the death from cerebrovascular accident. Author(s): Ono Y.

Source: Japanese Circulation Journal. 1969 November; 33(11): 1309-14. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5395974

- Biometeorologic studies on cerebrovascular diseases. I. Effects of meteorologic factors on the death from cerebrovascular accident. Author(s): Ono Y. Source: Japanese Circulation Journal. 1969 November; 33(11): 1285-98. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5395972
- Biometeorologic studies on cerebrovascular diseases. II. Seasonal observation on effects of meteorologic factors on the death from cerebrovascular accident. Author(s): Ono Y. Source: Japanese Circulation Journal. 1969 November; 33(11): 1299-308. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5395973
- Biometeorologic studies on cerebrovascular diseases. V. A multivariate analysis of meteorologic effects on cerebrovascular accident. Author(s): Ono Y, Aoki N, Horibe H, Hayakawa N, Okada H. Source: Japanese Circulation Journal. 1974 March; 38(3): 195-208. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4406960
- Biometeorologie studies on cerebrovascular diseases. (IV). Evaluation of meterorologic factors, their changes or combinations on the occurrence of cerebrovascular accident.
 Author(s): Ono Y, Horibe H, Hayakawa N, Aoki N, Okada H.
 Source: Japanese Circulation Journal. 1970 February; 34(2): 69-75.
 http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5468294
- Body composition assessed by anthropometry and bioelectric impedance analysis in older persons recovering from cerebrovascular accident. Author(s): Sotillo C, Lopez-Jurado M, Martin E, Mataix J, Llopis J. Source: Int J Vitam Nutr Res. 2003 February; 73(1): 32-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12690909
- Body weight supported treadmill and overground training in a patient post cerebrovascular accident. Author(s): Miller EW. Source: Neurorehabilitation. 2001; 16(3): 155-63. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11790900

- Brain tumor or cerebrovascular accident? Author(s): Gupta S, Boop WC Jr, Flanigan S. Source: J Ark Med Soc. 1973 May; 69(12): 388-91. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4267696
- Cerebral vascular accident after cardiac surgery: its impact on nursing care. Author(s): Lindsay M. Source: Progress in Cardiovascular Nursing. 1999 Spring; 14(2): 47-52. Review. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10457957
- Cerebral vascular accident during the recovery phase of hemolytic uremic syndrome. Author(s): Rasoulpour M, Leichtner A, San Jorge M, Hyams J. Source: Int J Pediatr Nephrol. 1985 October-December; 6(4): 287-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4093247
- Cerebral vascular accident in the infected diabetic ulcer patient. Author(s): Abu-Rumman PL, Nixon BP, Armstrong DG. Source: Journal of the American Podiatric Medical Association. 2002 January; 92(1): 59-60. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11796801
- Cerebral vascular accident: some characteristics of occupational therapy evaluation forms.

Author(s): Ottenbacher K. Source: Am J Occup Ther. 1980 April; 34(4): 268-71. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=7369088

• Cerebrovascular accident after percutaneous rf thermocoagulation of the trigeminal ganglion. Case report.

Author(s): Rish BL. Source: Journal of Neurosurgery. 1976 March; 44(3): 376-7. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=1249617

• Cerebrovascular accident after vacuum-assisted venous drainage in a Fontan patient: a cautionary tale.

Author(s): Jahangiri M, Rayner A, Keogh B, Lincoln C. Source: The Annals of Thoracic Surgery. 2001 November; 72(5): 1727-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11722073 10 Cerebral Vascular Accident

•

- Cerebrovascular accident in paroxysmal nocturnal haemoglobinuria. Author(s): Murthy GL, Srinivasan VR, Gayatri K. Source: J Assoc Physicians India. 2002 April; 50: 612. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12164428
- Cerebrovascular accident in sickle cell disease. Author(s): Alam M, Lodhi MA, Khan D. Source: J Coll Physicians Surg Pak. 2003 January; 13(1): 55-6. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12685980
- Cerebrovascular accident with unusual electrocardiographic changes. Author(s): Anderson GJ, Woodburn R, Fisch C. Source: American Heart Journal. 1973 September; 86(3): 395-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4727271
 - Cerebrovascular accident. Author(s): Barager FD. Source: Can Nurse. 1966 May; 62(5): 35-7. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5908728
- Cerebrovascular accidents in sickle cell disease: rates and risk factors. Author(s): Ohene-Frempong K, Weiner SJ, Sleeper LA, Miller ST, Embury S, Moohr JW, Wethers DL, Pegelow CH, Gill FM. Source: Blood. 1998 January 1; 91(1): 288-94. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9414296
- Characteristics of cerebrovascular accidents after percutaneous coronary interventions. Author(s): Dukkipati S, O'Neill WW, Harjai KJ, Sanders WP, Deo D, Boura JA, Bartholomew BA, Yerkey MW, Sadeghi HM, Kahn JK. Source: Journal of the American College of Cardiology. 2004 April 7; 43(7): 1161-7. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=15063423
- Coagulopathy, marantic endocarditis, and cerebrovascular accidents as paraneoplastic features in medullary thyroid cancer--case report and review of the literature. Author(s): Lal G, Brennan TV, Hambleton J, Clark OH. Source: Thyroid : Official Journal of the American Thyroid Association. 2003 June; 13(6): 601-5. Review. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12930605 • Coarctation of the aorta and cerebrovascular accident: a proposal for early corrective surgery.

Author(s): Shearer WT, Rutman JY, Weinberg WA, Goldring D. Source: The Journal of Pediatrics. 1970 December; 77(6): 1004-9. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5486617

• Comprehensive decongestive therapy for lymphedema in patients with a history of cerebral vascular accident.

Author(s): Rymal C. Source: Clinical Journal of Oncology Nursing. 2003 November-December; 7(6): 677-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=14705485

• Construct validation of an acute care occupational therapy cerebral vascular accident assessment tool.

Author(s): Van Deusen J, Shalik L, Harlowe D. Source: Can J Occup Ther. 1990 June; 57(3): 155-9. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10105435

• Coronary surgery with intermittent aortic cross-clamping: a word of caution on the incidence of cerebrovascular accidents: letter 2.

Author(s): Antunes PE, Antunes MJ. Source: The Annals of Thoracic Surgery. 2003 August; 76(2): 661; Author Reply 661-2. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12902146

- Cryofibrinogenemia and cerebrovascular accident. Author(s): Dagenais GR, Barbeau A, Delmore P. Source: Can Med Assoc J. 1968 March 9; 98(10): 475-8. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5645181
- Cryoglobulinemia and cerebrovascular accident. Author(s): Abramsky O, Herishanu Y, Lavy S. Source: Confin Neurol. 1971; 33(5): 291-6. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4335772
- Differences between persons with right or left cerebral vascular accident on the Assessment of Motor and Process Skills. Author(s): Bernspang B, Fisher AG.

Source: Archives of Physical Medicine and Rehabilitation. 1995 December; 76(12): 1144-51.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=8540792

- 12 Cerebral Vascular Accident
- Effect of instructions on functional reach in persons with and without cerebrovascular accident.
 Author(s): Fasoli SE, Trombly CA, Tickle-Degnen L, Verfaellie MH.
 Source: Am J Occup Ther. 2002 July-August; 56(4): 380-90.
 http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12125827
- Electrocardiographic changes in cerebrovascular accident (role of vagal hyperactivity and intracranial hypertension).

Author(s): Chhetri MK, De B. Source: Indian Heart J. 1965 October; 17(4): 347-55. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5835667

- Electrocardiographic normalization after cerebral vascular accident. Author(s): Gould L, Reddy RC, Kollali M, Singh BK, Zen B. Source: Journal of Electrocardiology. 1981; 14(2): 191-4. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=7276789
- Endothelial nitric oxide synthase intron 4, 27 bp repeat polymorphism in Turkish patients with deep vein thrombosis and cerebrovascular accidents. Author(s): Akar N, Akar E, Cin S, Deda G, Avcu F, Yalcin A. Source: Thrombosis Research. 1999 April 1; 94(1): 63-4. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10213182
- Evaluating and predicting outcome of acute cerebral vascular accident. Author(s): Dove HG, Schneider KC, Wallace JD. Source: Stroke; a Journal of Cerebral Circulation. 1984 September-October; 15(5): 858-64. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=6474538
- Evaluation of cerebrospinal fluid and serum glutamic oxalacetic transaminase estimation in cases of cerebrovascular accident. Author(s): Singh N, Singh H, Jolly SS, Rai B, Singh ID. Source: The Indian Journal of Medical Research. 1972 October; 60(10): 1443-51. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4661653
- Evaluation of serum and cerebrospinal fluid magnesium in cases of cerebrovascular accident--a preliminary communication. Author(s): Mangal BD, Kumar S, Bhatia KB, Mitra MK, Singh RR. Source: J Assoc Physicians India. 1975 May; 23(5): 339-42. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=1184559

• Evidence of an association between Chlamydia pneumoniae and cerebrovascular accidents.

Author(s): Bucurescu G, Stieritz DD. Source: European Journal of Neurology : the Official Journal of the European Federation of Neurological Societies. 2003 July; 10(4): 449-52. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12823500

 Genetic basis of cerebrovascular accidents associated with hypertension. Author(s): Rubattu S, Volpe M. Source: Cardiologia. 1999 May; 44(5): 433-7. Review. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10389347

 Genetic susceptibility to cerebrovascular accidents. Author(s): Rubattu S, Stanzione R, Gigante B, Bagalino A, Musumeci B, Volpe M. Source: Journal of Cardiovascular Pharmacology. 2001 November; 38 Suppl 2: S71-4. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11811383

- Giant peaked upright T waves in cerebrovascular accident. Author(s): Runge PJ, Bousvaros G. Source: British Heart Journal. 1970 September; 32(5): 717-9. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5470057
- Ice water test in patients with overactive bladder due to cerebrovascular accidents and bladder outlet obstruction.

Author(s): Ishigooka M, Hashimoto T, Hayami S, Suzuki Y, Izumi T, Nakada T. Source: Urologia Internationalis. 1997; 58(2): 84-7. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9096268

- Impact of aortic manipulation on incidence of cerebrovascular accidents after surgical myocardial revascularization.
 Author(s): Calafiore AM, Di Mauro M, Teodori G, Di Giammarco G, Cirmeni S, Contini M, Iaco AL, Pano M.
 Source: The Annals of Thoracic Surgery. 2002 May; 73(5): 1387-93.
 http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12022522
- In-utero cerebral vascular accident prior to external cephalic version. Author(s): DeVore GR. Source: Journal of Clinical Ultrasound : Jcu. 1991 May; 19(4): 227-9. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=1646228

• Invasive and noninvasive hemodynamic monitoring of patients with cerebrovascular accidents.

Author(s): Velmahos GC, Wo CC, Demetriades D, Bishop MH, Shoemaker WC. Source: The Western Journal of Medicine. 1998 July; 169(1): 17-22. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9682626

• Livedo reticularis and cerebrovascular accidents (Sneddon's syndrome) as a clinical expression of antiphospholipid syndrome.

Author(s): Gantcheva M, Tsankov N. Source: Journal of the European Academy of Dermatology and Venereology : Jeadv. 1999 March; 12(2): 157-60.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10343946

• Lupus and cerebrovascular accidents.

Author(s): Ware AE, Mongey AB. Source: Lupus. 1997; 6(5): 420-4. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9229359

• Manometric abnormality in dysphagic patients after medullary cerebrovascular accidents.

Author(s): Higo R, Tayama N, Watanabe T. Source: Orl; Journal for Oto-Rhino-Laryngology and Its Related Specialties. 2002 September-October; 64(5): 368-72. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12417783

Maternal mortality in Wisconsin: cerebral vascular accident. Author(s): Sandmire HF. Source: Wis Med J. 1989 June; 88(6): 23-4. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=2750188

Maximizing rehabilitation following cerebral vascular accident: the concept of a unified comprehensive stroke team.

Author(s): Chatel DA, Dunning D. Source: R I Med J. 1976 June; 59(6): 271-2,179. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=1065929

• MDMA ("Ecstasy") and its association with cerebrovascular accidents: preliminary findings.

Author(s): Reneman L, Habraken JB, Majoie CB, Booij J, den Heeten GJ. Source: Ajnr. American Journal of Neuroradiology. 2000 June-July; 21(6): 1001-7. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10871002

- Meta-analysis of antiarrhythmic therapy in the prevention of postoperative atrial fibrillation and the effect on hospital length of stay, costs, cerebrovascular accidents, and mortality in patients undergoing cardiac surgery.
 Author(s): Zimmer J, Pezzullo J, Choucair W, Southard J, Kokkinos P, Karasik P, Greenberg MD, Singh SN.
 Source: The American Journal of Cardiology. 2003 May 1; 91(9): 1137-40.
 http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12714166
- Minor thalassemia as a protective factor against cerebrovascular accidents. Author(s): Namazi MR. Source: Medical Hypotheses. 2002 September; 59(3): 361-2. Review. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12208171
- Mortality in cerebrovascular accident applicants to a rehabilitation center. Author(s): Wylie CM, White BK. Source: J Chronic Dis. 1964 August; 17(8): 713-9. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5878737
- Muscle sympathetic nerve activity during cold pressor test in patients with cerebrovascular accidents. Author(s): Mizushima T, Tajima F, Nakamura T, Yamamoto M, Lee KH, Ogata H. Source: Stroke; a Journal of Cerebral Circulation. 1998 March; 29(3): 607-12. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9506600
- Nonpenetrating injuries of the neck and cerebrovascular accident. Author(s): Marks RL, Freed MM. Source: Archives of Neurology. 1973 June; 28(6): 412-4. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4701389
- Nursing care study: a patient after cerebral vascular accident. Author(s): Hodgson SJ. Source: Nurs Times. 1977 April 14; 73(15): 524-6. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=854445
- Nursing the patient with cerebrovascular accident. Author(s): Thorpe EL, Coull EG. Source: Can Nurse. 1966 May; 62(5): 38-41. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5908729

- 16 Cerebral Vascular Accident
- Ophthalmic findings in 322 patients with a cerebral vascular accident. Author(s): Isaeff WB, Wallar PH, Duncan G. Source: Ann Ophthalmol. 1974 October; 6(10): 1059-69. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4429313
- Orthopedic issues after cerebrovascular accident. Author(s): Gardner MJ, Ong BC, Liporace F, Koval KJ. Source: Am J Orthop. 2002 October; 31(10): 559-68. Review. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12405561
- Panoramic radiography as an auxiliary in detecting patients at risk for cerebrovascular accident (CVA): a case report. Author(s): Manzi FR, Boscolo FN, de Almeida SM, Haiter Neto F. Source: J Oral Sci. 2003 September; 45(3): 177-80. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=14650584
- Paradoxical embolus after multiple trauma resulting in a cerebrovascular accident. Author(s): Price MD, Kanake P, Talmor D. Source: Anesthesia and Analgesia. 2004 April; 98(4): 1121-3, Table of Contents. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=15041610
- Permanent partial blindness in the puerperium--an unusual manifestation of cerebral vascular accident in pregnancy.

Author(s): Ilancheran A, Bharatham G, Ratnam SS. Source: The Australian & New Zealand Journal of Obstetrics & Gynaecology. 1988 May; 28(2): 144-5.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=3228409

• Permanent visual loss and cerebrovascular accidents in giant cell arteritis: predictors and response to treatment.

Author(s): Gonzalez-Gay MA, Blanco R, Rodriguez-Valverde V, Martinez-Taboada VM, Delgado-Rodriguez M, Figueroa M, Uriarte E.

Source: Arthritis and Rheumatism. 1998 August; 41(8): 1497-504.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9704651

 Physical, mental and social assessment of elderly patients suffering from cerebrovascular accident with special reference to rehabilitation. Author(s): Suchett-Kaye AI, Sarkar U, Elkan G, Waring M. Source: Gerontol Clin (Basel). 1971; 13(4): 192-206. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5116154 • Postoperative epidural hematoma or cerebrovascular accident? A dilemma in differential diagnosis.

Author(s): Pay LL, Chiu JW, Thomas E. Source: Acta Anaesthesiologica Scandinavica. 2002 February; 46(2): 217-20. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11942875

• Predictors of visual loss and cerebrovascular accidents in giant cell arteritis: comment on the article by Gonzalez-Gay et al.

Author(s): Gonzalez EB. Source: Arthritis and Rheumatism. 1999 April; 42(4): 825-7.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10211905

• **Quantitative evaluation of aphasia resulting from a cerebral vascular accident.** Author(s): Demeurisse G, Demol O, Robaye E, Coekaerts MJ, de Beuckelaer R, Derouck

M.

Source: Neuropsychologia. 1979; 17(1): 55-65. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=431810

• Questioning thrombolytic use for cerebrovascular accidents. Author(s): Li J. Source: The Journal of Emergency Medicine. 1998 September-October; 16(5): 757-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9752953

 Rehabilitation following the cerebral vascular accident. Author(s): Gregg RA. Source: Southern Medical Journal. 1966 November; 59(11): 1275-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5954417

Rehabilitation in the cerebral vascular accident.

Author(s): Martucci AA. Source: J Med Soc N J. 1966 January; 63(1): 11-4. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5215599

 Rehabilitation of the patient after cerebrovascular accident. Author(s): Kitowski VJ.
 Source: Southern Medical Journal. 1970 April; 63(4): 396-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5437586 • Semi-pro football player who suffered a cerebral vascular accident following forced cervical flexion and subsequent spinal manipulation.

Author(s): Hainline B.

Source: Medicine and Science in Sports and Exercise. 1992 September; 24(9): 1066. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=1406192

• Speed of finger tapping and goal attainment after unilateral cerebral vascular accident.

Author(s): Prigatano GP, Wong JL. Source: Archives of Physical Medicine and Rehabilitation. 1997 August; 78(8): 847-52. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A

bstract&list_uids=9344304

• Success and failure in memory training following a cerebral vascular accident. Author(s): Wilson B. Source: Cortex. 1982 December; 18(4): 581-94.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=7166044

• The "luxury-perfusion syndrome" following a cerebrovascular accident demonstrated by radionucleide angiography.

Author(s): Snow RM, Keyes JW Jr. Source: Journal of Nuclear Medicine : Official Publication, Society of Nuclear Medicine. 1974 October; 15(10): 907-9. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4417478

• The incidence of cerebrovascular accidents in patients with pituitary adenoma. Author(s): Brada M, Burchell L, Ashley S, Traish D.

Source: International Journal of Radiation Oncology, Biology, Physics. 1999 October 1; 45(3): 693-8.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10524424

• The influence of early aerobic training on the functional capacity in patients with cerebrovascular accident at the subacute stage.

Author(s): Katz-Leurer M, Shochina M, Carmeli E, Friedlander Y.

Source: Archives of Physical Medicine and Rehabilitation. 2003 November; 84(11): 1609-14.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=14639559

• The patient with a cerebral vascular accident.

Author(s): Goode MA. Source: Nursing Outlook. 1966 March; 14(3): 60-2. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5175440 • The relationship between dental disease and cerebral vascular accident in elderly United States veterans.

Author(s): Loesche WJ, Schork A, Terpenning MS, Chen YM, Kerr C, Dominguez BL. Source: Ann Periodontol. 1998 July; 3(1): 161-74. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=9722700

• Thyrotoxicosis, atrial fibrillation, and a cerebral vascular accident in a young woman. Author(s): Siegel D. Source: The American Journal of Emergency Medicine. 2001 November; 19(7): 605-6.

Source: The American Journal of Emergency Medicine. 2001 November; 19(7): 605-6. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11699016

• Transient detection of early wallerian degeneration on diffusion-weighted MRI after an acute cerebrovascular accident.

Author(s): Uchino A, Sawada A, Takase Y, Egashira R, Kudo S. Source: Neuroradiology. 2004 March; 46(3): 183-8. Epub 2004 February 27. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=14991261

- Two patients with a vital expansive syndrome following a cerebrovascular accident. Author(s): van der Lugt PJ, de Visser AP. Source: Psychiatr Neurol Neurochir. 1967 September-October; 70(5): 349-59. No Abstract Available. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=4861911
- Urinary continence after a cerebrovascular accident. Author(s): Olsen-Vetland P. Source: Nursing Standard : Official Newspaper of the Royal College of Nursing. 2003 June 11-17; 17(39): 37-41. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12836434
- Urinary incontinence in the acute phase of cerebral vascular accident. A descriptive study of hospitalized patients. Author(s): Adams M, Baron M, Caston MA. Source: Nursing Research. 1966 Spring; 15(2): 100-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=5177073
- Vestibular stimulation to improve ambulation after a cerebral vascular accident. Author(s): Fiebert IM, Brown E.
 Source: Physical Therapy. 1979 April; 59(4): 423-6. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=311925

- 20 Cerebral Vascular Accident
- Voiding and sexual dysfunction after cerebrovascular accidents. Author(s): Marinkovic S, Badlani G. Source: The Journal of Urology. 2001 February; 165(2): 359-70. Review. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11176374
- Wheelchair obstacle course performance in right cerebral vascular accident victims. Author(s): Webster JS, Cottam G, Gouvier WD, Blanton P, Beissel GF, Wofford J. Source: J Clin Exp Neuropsychol. 1989 March; 11(2): 295-310. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=2925837

CHAPTER 2. ALTERNATIVE MEDICINE AND CEREBRAL VASCULAR ACCIDENT

Overview

In this chapter, we will begin by introducing you to official information sources on complementary and alternative medicine (CAM) relating to cerebral vascular accident. At the conclusion of this chapter, we will provide additional sources.

National Center for Complementary and Alternative Medicine

The National Center for Complementary and Alternative Medicine (NCCAM) of the National Institutes of Health (http://nccam.nih.gov/) has created a link to the National Library of Medicine's databases to facilitate research for articles that specifically relate to cerebral vascular accident and complementary medicine. To search the database, go to the following Web site: http://www.nlm.nih.gov/nccam/camonpubmed.html. Select "CAM on PubMed." Enter "cerebral vascular accident" (or synonyms) into the search box. Click "Go." The following references provide information on particular aspects of complementary and alternative medicine that are related to cerebral vascular accident:

 "Spontaneous" cervical arterial dissection. Author(s): Norris JW, Beletsky V, Nadareishvili Z. Source: Stroke; a Journal of Cerebral Circulation. 2002 August; 33(8): 1945-6; Author Reply 1945-6. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=12154240

 (-)Clausenamide improves long-term potentiation impairment and attenuates apoptosis after transient middle cerebral artery occlusion in rats. Author(s): Tang K, Zhang JT. Source: Neurological Research. 2003 October; 25(7): 713-7. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=14579788

- Effects of thoraco-lumbar electric sensory stimulation on knee extensor spasticity of persons who survived cerebrovascular accident (CVA). Author(s): Wang RY, Chan RC, Tsai MW.
 Source: Journal of Rehabilitation Research and Development. 2000 January-February; 37(1): 73-9. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=10847574
- Hyperventilation-precipitated cerebrovascular accident in a patient with sickle cell anaemia. Author(s): Fatunde OJ, Sodeinde O, Familusi JB. Source: Afr J Med Med Sci. 2000 September-December; 29(3-4): 227-8. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=A bstract&list_uids=11713995

Additional Web Resources

A number of additional Web sites offer encyclopedic information covering CAM and related topics. The following is a representative sample:

- Alternative Medicine Foundation, Inc.: http://www.herbmed.org/
- AOL: http://search.aol.com/cat.adp?id=169&layer=&from=subcats
- Chinese Medicine: http://www.newcenturynutrition.com/
- drkoop.com[®]: http://www.drkoop.com/InteractiveMedicine/IndexC.html
- Family Village: http://www.familyvillage.wisc.edu/med_altn.htm
- Google: http://directory.google.com/Top/Health/Alternative/
- Healthnotes: http://www.healthnotes.com/
- MedWebPlus: http://medwebplus.com/subject/Alternative_and_Complementary_Medicine
- Open Directory Project: http://dmoz.org/Health/Alternative/
- HealthGate: http://www.tnp.com/
- WebMD[®]Health: http://my.webmd.com/drugs_and_herbs
- WholeHealthMD.com: http://www.wholehealthmd.com/reflib/0,1529,00.html
- Yahoo.com: http://dir.yahoo.com/Health/Alternative_Medicine/

The following is a specific Web list relating to cerebral vascular accident; please note that any particular subject below may indicate either a therapeutic use, or a contraindication (potential danger), and does not reflect an official recommendation:

• Herbs and Supplements

Glycyrrhiza

Alternative names: Licorice; Glycyrrhiza glabra L. Source: Alternative Medicine Foundation, Inc.; www.amfoundation.org

General References

A good place to find general background information on CAM is the National Library of Medicine. It has prepared within the MEDLINEplus system an information topic page dedicated to complementary and alternative medicine. To access this page, go to the MEDLINEplus site at http://www.nlm.nih.gov/medlineplus/alternativemedicine.html. This Web site provides a general overview of various topics and can lead to a number of general sources.

CHAPTER 3. DISSERTATIONS ON CEREBRAL VASCULAR ACCIDENT

Overview

In this chapter, we will give you a bibliography on recent dissertations relating to cerebral vascular accident. We will also provide you with information on how to use the Internet to stay current on dissertations. **IMPORTANT NOTE:** When following the search strategy described below, you may discover <u>non-medical dissertations</u> that use the generic term "cerebral vascular accident" (or a synonym) in their titles. To accurately reflect the results that you might find while conducting research on cerebral vascular accident, <u>we have not necessarily excluded non-medical dissertations</u> in this bibliography.

Dissertations on Cerebral Vascular Accident

ProQuest Digital Dissertations, the largest archive of academic dissertations available, is located at the following Web address: **http://wwwlib.umi.com/dissertations**. From this archive, we have compiled the following list covering dissertations devoted to cerebral vascular accident. You will see that the information provided includes the dissertation's title, its author, and the institution with which the author is associated. The following covers recent dissertations found when using this search procedure:

• Analysis of the quantitative and qualitative scoring systems of the Luria-Nebraska Neuropsychological Battery in distinguishing between left and right cerebral vascular accident patients by Robbins, Helene Charlotte, PhD from Temple University, 1996, 247 pages

http://wwwlib.umi.com/dissertations/fullcit/9707000

- Effects of Medical Family Therapy on Rehabilitation of Cerebral Vascular Accident Patients and Their Families by Chewning, Dudley Grady, EdD from East Texas State University, 1995, 57 pages http://wwwlib.umi.com/dissertations/fullcit/9600114
- Memory Congruency of Male Post Cerebral Vascular Accident Victims Pertaining to Their Psychological and Social Adjustments to Illness by Garlinghouse, Nancy Ruth Manus, PhD from Kansas State University, 1986, 129 pages http://wwwlib.umi.com/dissertations/fullcit/8624652

- 26 Cerebral Vascular Accident
- The Efficacy of Proprioceptive Neuromuscular Facilitation (PNF) and Biofeedback Training (BFT) on the Rehabilitation of the Cerebral Vascular Accident (CVA). by Roncarati, Alfred L., EdD from Boston University School of Education, 1978, 86 pages http://wwwlib.umi.com/dissertations/fullcit/7905019

Keeping Current

Ask the medical librarian at your library if it has full and unlimited access to the *ProQuest Digital Dissertations* database. From the library, you should be able to do more complete searches via http://wwwlib.umi.com/dissertations.

CHAPTER 4. BOOKS ON CEREBRAL VASCULAR ACCIDENT

Overview

This chapter provides bibliographic book references relating to cerebral vascular accident. In addition to online booksellers such as **www.amazon.com** and **www.bn.com**, excellent sources for book titles on cerebral vascular accident include the Combined Health Information Database and the National Library of Medicine. Your local medical library also may have these titles available for loan.

Chapters on Cerebral Vascular Accident

In order to find chapters that specifically relate to cerebral vascular accident, an excellent source of abstracts is the Combined Health Information Database. You will need to limit your search to book chapters and cerebral vascular accident using the "Detailed Search" option. Go to the following hyperlink: http://chid.nih.gov/detail/detail.html. To find book chapters, use the drop boxes at the bottom of the search page where "You may refine your search by." Select the dates and language you prefer, and the format option "Book Chapter." Type "cerebral vascular accident" (or synonyms) into the "For these words:" box. The following is a typical result when searching for book chapters on cerebral vascular accident:

• Medical Emergencies

Source: in Lockhart, P.B. Oral Medicine and Hospital Practice. Chicago, IL: Special Care Dentistry. 1997. p. 6.3-6.36.

Contact: Available from Special Care Dentistry. 211 East Chicago Avenue, Chicago, IL 60611. (312) 440-2660. Fax (312) 440-2824. PRICE: \$27.00 (member) or \$30.00 (nonmember), plus shipping and handling; institutional prices and bulk orders available. ISBN: 0965719103.

Summary: This chapter is from a manual designed to help dental residents, students, and practitioners engaged in the care of patients in the hospital setting. This chapter discusses medical emergencies. Topics include respiratory difficulty due to foreign body or asthma; cardiac and vascular emergencies, including angina pectoris, myocardial infarction, cardiac arrest, pulmonary edema, and **cerebral vascular accident** (stroke); allergic reactions; hemostasis, including patient evaluation and the treatment of

28 Cerebral Vascular Accident

hemorrhage; syncope, including vasovagal syncope, hypoglycemia, drug reactions, and postural hypotension; shock; adrenal cortical insufficiency; convulsive disorders; drug overdose and toxicity, including asymptomatic and symptomatic patients, narcotic overdose, benzodiazepine overdose, sedative or barbiturate overdose, and local anesthetic toxicity; and the diabetic emergencies of hypoglycemia shock and hyperglycemia coma. Most information is presented in outline format, for ease of access. 9 tables.
APPENDICES

APPENDIX A. PHYSICIAN RESOURCES

Overview

In this chapter, we focus on databases and Internet-based guidelines and information resources created or written for a professional audience.

NIH Guidelines

Commonly referred to as "clinical" or "professional" guidelines, the National Institutes of Health publish physician guidelines for the most common diseases. Publications are available at the following by relevant Institute⁴:

- Office of the Director (OD); guidelines consolidated across agencies available at http://www.nih.gov/health/consumer/conkey.htm
- National Institute of General Medical Sciences (NIGMS); fact sheets available at http://www.nigms.nih.gov/news/facts/
- National Library of Medicine (NLM); extensive encyclopedia (A.D.A.M., Inc.) with guidelines: http://www.nlm.nih.gov/medlineplus/healthtopics.html
- National Cancer Institute (NCI); guidelines available at http://www.cancer.gov/cancerinfo/list.aspx?viewid=5f35036e-5497-4d86-8c2c-714a9f7c8d25
- National Eye Institute (NEI); guidelines available at http://www.nei.nih.gov/order/index.htm
- National Heart, Lung, and Blood Institute (NHLBI); guidelines available at http://www.nhlbi.nih.gov/guidelines/index.htm
- National Human Genome Research Institute (NHGRI); research available at http://www.genome.gov/page.cfm?pageID=10000375
- National Institute on Aging (NIA); guidelines available at http://www.nia.nih.gov/health/

⁴ These publications are typically written by one or more of the various NIH Institutes.

32 Cerebral Vascular Accident

- National Institute on Alcohol Abuse and Alcoholism (NIAAA); guidelines available at http://www.niaaa.nih.gov/publications/publications.htm
- National Institute of Allergy and Infectious Diseases (NIAID); guidelines available at http://www.niaid.nih.gov/publications/
- National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS); fact sheets and guidelines available at http://www.niams.nih.gov/hi/index.htm
- National Institute of Child Health and Human Development (NICHD); guidelines available at http://www.nichd.nih.gov/publications/pubskey.cfm
- National Institute on Deafness and Other Communication Disorders (NIDCD); fact sheets and guidelines at http://www.nidcd.nih.gov/health/
- National Institute of Dental and Craniofacial Research (NIDCR); guidelines available at http://www.nidr.nih.gov/health/
- National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK); guidelines available at http://www.niddk.nih.gov/health/health.htm
- National Institute on Drug Abuse (NIDA); guidelines available at http://www.nida.nih.gov/DrugAbuse.html
- National Institute of Environmental Health Sciences (NIEHS); environmental health information available at http://www.niehs.nih.gov/external/facts.htm
- National Institute of Mental Health (NIMH); guidelines available at http://www.nimh.nih.gov/practitioners/index.cfm
- National Institute of Neurological Disorders and Stroke (NINDS); neurological disorder information pages available at http://www.ninds.nih.gov/health and medical/disorder index.htm
- National Institute of Nursing Research (NINR); publications on selected illnesses at http://www.nih.gov/ninr/news-info/publications.html
- National Institute of Biomedical Imaging and Bioengineering; general information at http://grants.nih.gov/grants/becon/becon_info.htm
- Center for Information Technology (CIT); referrals to other agencies based on keyword searches available at http://kb.nih.gov/www_query_main.asp
- National Center for Complementary and Alternative Medicine (NCCAM); health information available at http://nccam.nih.gov/health/
- National Center for Research Resources (NCRR); various information directories available at http://www.ncrr.nih.gov/publications.asp
- Office of Rare Diseases; various fact sheets available at http://rarediseases.info.nih.gov/html/resources/rep_pubs.html
- Centers for Disease Control and Prevention; various fact sheets on infectious diseases available at http://www.cdc.gov/publications.htm

NIH Databases

In addition to the various Institutes of Health that publish professional guidelines, the NIH has designed a number of databases for professionals.⁵ Physician-oriented resources provide a wide variety of information related to the biomedical and health sciences, both past and present. The format of these resources varies. Searchable databases, bibliographic citations, full-text articles (when available), archival collections, and images are all available. The following are referenced by the National Library of Medicine:⁶

- **Bioethics:** Access to published literature on the ethical, legal, and public policy issues surrounding healthcare and biomedical research. This information is provided in conjunction with the Kennedy Institute of Ethics located at Georgetown University, Washington, D.C.: http://www.nlm.nih.gov/databases/databases_bioethics.html
- **HIV/AIDS Resources:** Describes various links and databases dedicated to HIV/AIDS research: http://www.nlm.nih.gov/pubs/factsheets/aidsinfs.html
- NLM Online Exhibitions: Describes "Exhibitions in the History of Medicine": http://www.nlm.nih.gov/exhibition/exhibition.html. Additional resources for historical scholarship in medicine: http://www.nlm.nih.gov/hmd/hmd.html
- **Biotechnology Information:** Access to public databases. The National Center for Biotechnology Information conducts research in computational biology, develops software tools for analyzing genome data, and disseminates biomedical information for the better understanding of molecular processes affecting human health and disease: http://www.ncbi.nlm.nih.gov/
- **Population Information:** The National Library of Medicine provides access to worldwide coverage of population, family planning, and related health issues, including family planning technology and programs, fertility, and population law and policy: http://www.nlm.nih.gov/databases/databases_population.html
- Cancer Information: Access to cancer-oriented databases: http://www.nlm.nih.gov/databases/databases_cancer.html
- **Profiles in Science:** Offering the archival collections of prominent twentieth-century biomedical scientists to the public through modern digital technology: http://www.profiles.nlm.nih.gov/
- Chemical Information: Provides links to various chemical databases and references: http://sis.nlm.nih.gov/Chem/ChemMain.html
- Clinical Alerts: Reports the release of findings from the NIH-funded clinical trials where such release could significantly affect morbidity and mortality: http://www.nlm.nih.gov/databases/alerts/clinical_alerts.html
- **Space Life Sciences:** Provides links and information to space-based research (including NASA): http://www.nlm.nih.gov/databases/databases_space.html
- MEDLINE: Bibliographic database covering the fields of medicine, nursing, dentistry, veterinary medicine, the healthcare system, and the pre-clinical sciences: http://www.nlm.nih.gov/databases/databases_medline.html

⁵ Remember, for the general public, the National Library of Medicine recommends the databases referenced in MEDLINE*plus* (http://medlineplus.gov/ or http://www.nlm.nih.gov/medlineplus/databases.html).

⁶ See http://www.nlm.nih.gov/databases/databases.html.

34 Cerebral Vascular Accident

- Toxicology and Environmental Health Information (TOXNET): Databases covering toxicology and environmental health: http://sis.nlm.nih.gov/Tox/ToxMain.html
- Visible Human Interface: Anatomically detailed, three-dimensional representations of normal male and female human bodies: http://www.nlm.nih.gov/research/visible/visible_human.html

The NLM Gateway⁷

The NLM (National Library of Medicine) Gateway is a Web-based system that lets users search simultaneously in multiple retrieval systems at the U.S. National Library of Medicine (NLM). It allows users of NLM services to initiate searches from one Web interface, providing one-stop searching for many of NLM's information resources or databases.⁸ To use the NLM Gateway, simply go to the search site at http://gateway.nlm.nih.gov/gw/Cmd. Type "cerebral vascular accident" (or synonyms) into the search box and click "Search." The results will be presented in a tabular form, indicating the number of references in each database category.

Category	Items Found
Journal Articles	27111
Books / Periodicals / Audio Visual	180
Consumer Health	1127
Meeting Abstracts	114
Other Collections	53
Total	28585

Results Summary

HSTAT⁹

HSTAT is a free, Web-based resource that provides access to full-text documents used in healthcare decision-making.¹⁰ These documents include clinical practice guidelines, quick-reference guides for clinicians, consumer health brochures, evidence reports and technology assessments from the Agency for Healthcare Research and Quality (AHRQ), as well as AHRQ's Put Prevention Into Practice.¹¹ Simply search by "cerebral vascular accident" (or synonyms) at the following Web site: http://text.nlm.nih.gov.

⁷ Adapted from NLM: http://gateway.nlm.nih.gov/gw/Cmd?Overview.x.

⁸ The NLM Gateway is currently being developed by the Lister Hill National Center for Biomedical Communications (LHNCBC) at the National Library of Medicine (NLM) of the National Institutes of Health (NIH).
⁹ Adapted from HSTAT: http://www.nlm.nih.gov/pubs/factsheets/hstat.html.

¹⁰ The HSTAT URL is **http://hstat.nlm.nih.gov/**.

¹¹ Other important documents in HSTAT include: the National Institutes of Health (NIH) Consensus Conference Reports and Technology Assessment Reports; the HIV/AIDS Treatment Information Service (ATIS) resource documents; the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment (SAMHSA/CSAT) Treatment Improvement Protocols (TIP) and Center for Substance Abuse Prevention (SAMHSA/CSAP) Prevention Enhancement Protocols System (PEPS); the Public Health Service (PHS) Preventive Services Task Force's *Guide to Clinical Preventive Services*; the independent, nonfederal Task Force on Community Services' *Guide to Community Preventive Services*; and the Health Technology Advisory Committee (HTAC) of the Minnesota Health Care Commission (MHCC) health technology evaluations.

Coffee Break: Tutorials for Biologists¹²

Coffee Break is a general healthcare site that takes a scientific view of the news and covers recent breakthroughs in biology that may one day assist physicians in developing treatments. Here you will find a collection of short reports on recent biological discoveries. Each report incorporates interactive tutorials that demonstrate how bioinformatics tools are used as a part of the research process. Currently, all Coffee Breaks are written by NCBI staff.¹³ Each report is about 400 words and is usually based on a discovery reported in one or more articles from recently published, peer-reviewed literature.¹⁴ This site has new articles every few weeks, so it can be considered an online magazine of sorts. It is intended for general background information. You can access the Coffee Break Web site at the following hyperlink: http://www.ncbi.nlm.nih.gov/Coffeebreak/.

Other Commercial Databases

In addition to resources maintained by official agencies, other databases exist that are commercial ventures addressing medical professionals. Here are some examples that may interest you:

- CliniWeb International: Index and table of contents to selected clinical information on the Internet; see http://www.ohsu.edu/cliniweb/.
- Medical World Search: Searches full text from thousands of selected medical sites on the Internet; see http://www.mwsearch.com/.

¹² Adapted from http://www.ncbi.nlm.nih.gov/Coffeebreak/Archive/FAQ.html.

¹³ The figure that accompanies each article is frequently supplied by an expert external to NCBI, in which case the source of the figure is cited. The result is an interactive tutorial that tells a biological story.

¹⁴ After a brief introduction that sets the work described into a broader context, the report focuses on how a molecular understanding can provide explanations of observed biology and lead to therapies for diseases. Each vignette is accompanied by a figure and hypertext links that lead to a series of pages that interactively show how NCBI tools and resources are used in the research process.

APPENDIX B. PATIENT RESOURCES

Overview

Official agencies, as well as federally funded institutions supported by national grants, frequently publish a variety of guidelines written with the patient in mind. These are typically called "Fact Sheets" or "Guidelines." They can take the form of a brochure, information kit, pamphlet, or flyer. Often they are only a few pages in length. Since new guidelines on cerebral vascular accident can appear at any moment and be published by a number of sources, the best approach to finding guidelines is to systematically scan the Internet-based services that post them.

Patient Guideline Sources

The remainder of this chapter directs you to sources which either publish or can help you find additional guidelines on topics related to cerebral vascular accident. Due to space limitations, these sources are listed in a concise manner. Do not hesitate to consult the following sources by either using the Internet hyperlink provided, or, in cases where the contact information is provided, contacting the publisher or author directly.

The National Institutes of Health

The NIH gateway to patients is located at **http://health.nih.gov/**. From this site, you can search across various sources and institutes, a number of which are summarized below.

Topic Pages: MEDLINEplus

The National Library of Medicine has created a vast and patient-oriented healthcare information portal called MEDLINEplus. Within this Internet-based system are "health topic pages" which list links to available materials relevant to cerebral vascular accident. To access this system, log on to http://www.nlm.nih.gov/medlineplus/healthtopics.html. From there you can either search using the alphabetical index or browse by broad topic areas. Recently, MEDLINEplus listed the following when searched for "cerebral vascular accident":

38 Cerebral Vascular Accident

Brain Diseases http://www.nlm.nih.gov/medlineplus/braindiseases.html

Death and Dying http://www.nlm.nih.gov/medlineplus/deathanddying.html

Degenerative Nerve Diseases http://www.nlm.nih.gov/medlineplus/degenerativenervediseases.html

Head and Brain Injuries http://www.nlm.nih.gov/medlineplus/headandbraininjuries.html

Heart Diseases

http://www.nlm.nih.gov/medlineplus/heartdiseases.html

Pacemakers and Implantable Defibrillators http://www.nlm.nih.gov/medlineplus/pacemakersandimplantabledefibrillators.ht

Speech and Communication Disorders http://www.nlm.nih.gov/medlineplus/speechandcommunicationdisorders.html

Stroke

http://www.nlm.nih.gov/medlineplus/stroke.html

Water Safety

http://www.nlm.nih.gov/medlineplus/watersafetyrecreational.html

You may also choose to use the search utility provided by MEDLINEplus at the following Web address: **http://www.nlm.nih.gov/medlineplus/**. Simply type a keyword into the search box and click "Search." This utility is similar to the NIH search utility, with the exception that it only includes materials that are linked within the MEDLINEplus system (mostly patient-oriented information). It also has the disadvantage of generating unstructured results. We recommend, therefore, that you use this method only if you have a very targeted search.

The NIH Search Utility

The NIH search utility allows you to search for documents on over 100 selected Web sites that comprise the NIH-WEB-SPACE. Each of these servers is "crawled" and indexed on an ongoing basis. Your search will produce a list of various documents, all of which will relate in some way to cerebral vascular accident. The drawbacks of this approach are that the information is not organized by theme and that the references are often a mix of information for professionals and patients. Nevertheless, a large number of the listed Web sites provide useful background information. We can only recommend this route, therefore, for relatively rare or specific disorders, or when using highly targeted searches. To use the NIH search utility, visit the following Web page: http://search.nih.gov/index.html.

Additional Web Sources

A number of Web sites are available to the public that often link to government sites. These can also point you in the direction of essential information. The following is a representative sample:

- AOL: http://search.aol.com/cat.adp?id=168&layer=&from=subcats
- Family Village: http://www.familyvillage.wisc.edu/specific.htm
- Google: http://directory.google.com/Top/Health/Conditions_and_Diseases/
- Med Help International: http://www.medhelp.org/HealthTopics/A.html
- Open Directory Project: http://dmoz.org/Health/Conditions_and_Diseases/
- Yahoo.com: http://dir.yahoo.com/Health/Diseases_and_Conditions/
- WebMD[®]Health: http://my.webmd.com/health_topics

Finding Associations

There are several Internet directories that provide lists of medical associations with information on or resources relating to cerebral vascular accident. By consulting all of associations listed in this chapter, you will have nearly exhausted all sources for patient associations concerned with cerebral vascular accident.

The National Health Information Center (NHIC)

The National Health Information Center (NHIC) offers a free referral service to help people find organizations that provide information about cerebral vascular accident. For more information, see the NHIC's Web site at http://www.health.gov/NHIC/ or contact an information specialist by calling 1-800-336-4797.

Directory of Health Organizations

The Directory of Health Organizations, provided by the National Library of Medicine Specialized Information Services, is a comprehensive source of information on associations. The Directory of Health Organizations database can be accessed via the Internet at **http://www.sis.nlm.nih.gov/Dir/DirMain.html**. It is composed of two parts: DIRLINE and Health Hotlines.

The DIRLINE database comprises some 10,000 records of organizations, research centers, and government institutes and associations that primarily focus on health and biomedicine. To access DIRLINE directly, go to the following Web site: **http://dirline.nlm.nih.gov/**. Simply type in "cerebral vascular accident" (or a synonym), and you will receive information on all relevant organizations listed in the database.

Health Hotlines directs you to toll-free numbers to over 300 organizations. You can access this database directly at **http://www.sis.nlm.nih.gov/hotlines/**. On this page, you are given the option to search by keyword or by browsing the subject list. When you have received

your search results, click on the name of the organization for its description and contact information.

The Combined Health Information Database

Another comprehensive source of information on healthcare associations is the Combined Health Information Database. Using the "Detailed Search" option, you will need to limit your search to "Organizations" and "cerebral vascular accident". Type the following hyperlink into your Web browser: http://chid.nih.gov/detail/detail.html. To find associations, use the drop boxes at the bottom of the search page where "You may refine your search by." For publication date, select "All Years." Then, select your preferred language and the format option "Organization Resource Sheet." Type "cerebral vascular accident" (or synonyms) into the "For these words:" box. You should check back periodically with this database since it is updated every three months.

The National Organization for Rare Disorders, Inc.

The National Organization for Rare Disorders, Inc. has prepared a Web site that provides, at no charge, lists of associations organized by health topic. You can access this database at the following Web site: http://www.rarediseases.org/search/orgsearch.html. Type "cerebral vascular accident" (or a synonym) into the search box, and click "Submit Query."

APPENDIX C. FINDING MEDICAL LIBRARIES

Overview

In this Appendix, we show you how to quickly find a medical library in your area.

Preparation

Your local public library and medical libraries have interlibrary loan programs with the National Library of Medicine (NLM), one of the largest medical collections in the world. According to the NLM, most of the literature in the general and historical collections of the National Library of Medicine is available on interlibrary loan to any library. If you would like to access NLM medical literature, then visit a library in your area that can request the publications for you.¹⁵

Finding a Local Medical Library

The quickest method to locate medical libraries is to use the Internet-based directory published by the National Network of Libraries of Medicine (NN/LM). This network includes 4626 members and affiliates that provide many services to librarians, health professionals, and the public. To find a library in your area, simply visit http://nnlm.gov/members/adv.html or call 1-800-338-7657.

Medical Libraries in the U.S. and Canada

In addition to the NN/LM, the National Library of Medicine (NLM) lists a number of libraries with reference facilities that are open to the public. The following is the NLM's list and includes hyperlinks to each library's Web site. These Web pages can provide information on hours of operation and other restrictions. The list below is a small sample of

¹⁵ Adapted from the NLM: http://www.nlm.nih.gov/psd/cas/interlibrary.html.

42 Cerebral Vascular Accident

libraries recommended by the National Library of Medicine (sorted alphabetically by name of the U.S. state or Canadian province where the library is located)¹⁶:

- Alabama: Health InfoNet of Jefferson County (Jefferson County Library Cooperative, Lister Hill Library of the Health Sciences), http://www.uab.edu/infonet/
- Alabama: Richard M. Scrushy Library (American Sports Medicine Institute)
- Arizona: Samaritan Regional Medical Center: The Learning Center (Samaritan Health System, Phoenix, Arizona), http://www.samaritan.edu/library/bannerlibs.htm
- California: Kris Kelly Health Information Center (St. Joseph Health System, Humboldt), http://www.humboldt1.com/~kkhic/index.html
- California: Community Health Library of Los Gatos, http://www.healthlib.org/orgresources.html
- California: Consumer Health Program and Services (CHIPS) (County of Los Angeles Public Library, Los Angeles County Harbor-UCLA Medical Center Library) Carson, CA, http://www.colapublib.org/services/chips.html
- California: Gateway Health Library (Sutter Gould Medical Foundation)
- California: Health Library (Stanford University Medical Center), http://www-med.stanford.edu/healthlibrary/
- California: Patient Education Resource Center Health Information and Resources (University of California, San Francisco), http://sfghdean.ucsf.edu/barnett/PERC/default.asp
- California: Redwood Health Library (Petaluma Health Care District), http://www.phcd.org/rdwdlib.html
- California: Los Gatos PlaneTree Health Library, http://planetreesanjose.org/
- **California:** Sutter Resource Library (Sutter Hospitals Foundation, Sacramento), http://suttermedicalcenter.org/library/
- California: Health Sciences Libraries (University of California, Davis), http://www.lib.ucdavis.edu/healthsci/
- California: ValleyCare Health Library & Ryan Comer Cancer Resource Center (ValleyCare Health System, Pleasanton), http://gaelnet.stmarysca.edu/other.libs/gbal/east/vchl.html
- California: Washington Community Health Resource Library (Fremont), http://www.healthlibrary.org/
- Colorado: William V. Gervasini Memorial Library (Exempla Healthcare), http://www.saintjosephdenver.org/yourhealth/libraries/
- **Connecticut:** Hartford Hospital Health Science Libraries (Hartford Hospital), http://www.harthosp.org/library/
- **Connecticut:** Healthnet: Connecticut Consumer Health Information Center (University of Connecticut Health Center, Lyman Maynard Stowe Library), http://library.uchc.edu/departm/hnet/

¹⁶ Abstracted from http://www.nlm.nih.gov/medlineplus/libraries.html.

- **Connecticut:** Waterbury Hospital Health Center Library (Waterbury Hospital, Waterbury), http://www.waterburyhospital.com/library/consumer.shtml
- **Delaware:** Consumer Health Library (Christiana Care Health System, Eugene du Pont Preventive Medicine & Rehabilitation Institute, Wilmington), http://www.christianacare.org/health_guide/health_guide_pmri_health_info.cfm
- Delaware: Lewis B. Flinn Library (Delaware Academy of Medicine, Wilmington), http://www.delamed.org/chls.html
- **Georgia:** Family Resource Library (Medical College of Georgia, Augusta), http://cmc.mcg.edu/kids_families/fam_resources/fam_res_lib/frl.htm
- **Georgia:** Health Resource Center (Medical Center of Central Georgia, Macon), http://www.mccg.org/hrc/hrchome.asp
- Hawaii: Hawaii Medical Library: Consumer Health Information Service (Hawaii Medical Library, Honolulu), http://hml.org/CHIS/
- Idaho: DeArmond Consumer Health Library (Kootenai Medical Center, Coeur d'Alene), http://www.nicon.org/DeArmond/index.htm
- Illinois: Health Learning Center of Northwestern Memorial Hospital (Chicago), http://www.nmh.org/health_info/hlc.html
- Illinois: Medical Library (OSF Saint Francis Medical Center, Peoria), http://www.osfsaintfrancis.org/general/library/
- Kentucky: Medical Library Services for Patients, Families, Students & the Public (Central Baptist Hospital, Lexington), http://www.centralbap.com/education/community/library.cfm
- Kentucky: University of Kentucky Health Information Library (Chandler Medical Center, Lexington), http://www.mc.uky.edu/PatientEd/
- Louisiana: Alton Ochsner Medical Foundation Library (Alton Ochsner Medical Foundation, New Orleans), http://www.ochsner.org/library/
- Louisiana: Louisiana State University Health Sciences Center Medical Library-Shreveport, http://lib-sh.lsuhsc.edu/
- **Maine:** Franklin Memorial Hospital Medical Library (Franklin Memorial Hospital, Farmington), http://www.fchn.org/fmh/lib.htm
- Maine: Gerrish-True Health Sciences Library (Central Maine Medical Center, Lewiston), http://www.cmmc.org/library/library.html
- Maine: Hadley Parrot Health Science Library (Eastern Maine Healthcare, Bangor), http://www.emh.org/hll/hpl/guide.htm
- Maine: Maine Medical Center Library (Maine Medical Center, Portland), http://www.mmc.org/library/
- Maine: Parkview Hospital (Brunswick), http://www.parkviewhospital.org/
- Maine: Southern Maine Medical Center Health Sciences Library (Southern Maine Medical Center, Biddeford), http://www.smmc.org/services/service.php3?choice=10
- **Maine:** Stephens Memorial Hospital's Health Information Library (Western Maine Health, Norway), http://www.wmhcc.org/Library/

- 44 Cerebral Vascular Accident
- Manitoba, Canada: Consumer & Patient Health Information Service (University of Manitoba Libraries), http://www.umanitoba.ca/libraries/units/health/reference/chis.html
- Manitoba, Canada: J.W. Crane Memorial Library (Deer Lodge Centre, Winnipeg), http://www.deerlodge.mb.ca/crane_library/about.asp
- **Maryland:** Health Information Center at the Wheaton Regional Library (Montgomery County, Dept. of Public Libraries, Wheaton Regional Library), http://www.mont.lib.md.us/healthinfo/hic.asp
- Massachusetts: Baystate Medical Center Library (Baystate Health System), http://www.baystatehealth.com/1024/
- **Massachusetts:** Boston University Medical Center Alumni Medical Library (Boston University Medical Center), http://med-libwww.bu.edu/library/lib.html
- Massachusetts: Lowell General Hospital Health Sciences Library (Lowell General Hospital, Lowell), http://www.lowellgeneral.org/library/HomePageLinks/WWW.htm
- Massachusetts: Paul E. Woodard Health Sciences Library (New England Baptist Hospital, Boston), http://www.nebh.org/health_lib.asp
- Massachusetts: St. Luke's Hospital Health Sciences Library (St. Luke's Hospital, Southcoast Health System, New Bedford), http://www.southcoast.org/library/
- Massachusetts: Treadwell Library Consumer Health Reference Center (Massachusetts General Hospital), http://www.mgh.harvard.edu/library/chrcindex.html
- Massachusetts: UMass HealthNet (University of Massachusetts Medical School, Worchester), http://healthnet.umassmed.edu/
- Michigan: Botsford General Hospital Library Consumer Health (Botsford General Hospital, Library & Internet Services), http://www.botsfordlibrary.org/consumer.htm
- Michigan: Helen DeRoy Medical Library (Providence Hospital and Medical Centers), http://www.providence-hospital.org/library/
- Michigan: Marquette General Hospital Consumer Health Library (Marquette General Hospital, Health Information Center), http://www.mgh.org/center.html
- Michigan: Patient Education Resouce Center University of Michigan Cancer Center (University of Michigan Comprehensive Cancer Center, Ann Arbor), http://www.cancer.med.umich.edu/learn/leares.htm
- Michigan: Sladen Library & Center for Health Information Resources Consumer Health Information (Detroit), http://www.henryford.com/body.cfm?id=39330
- Montana: Center for Health Information (St. Patrick Hospital and Health Sciences Center, Missoula)
- National: Consumer Health Library Directory (Medical Library Association, Consumer and Patient Health Information Section), http://caphis.mlanet.org/directory/index.html
- **National:** National Network of Libraries of Medicine (National Library of Medicine) provides library services for health professionals in the United States who do not have access to a medical library, http://nnlm.gov/
- **National:** NN/LM List of Libraries Serving the Public (National Network of Libraries of Medicine), http://nnlm.gov/members/

- Nevada: Health Science Library, West Charleston Library (Las Vegas-Clark County Library District, Las Vegas), http://www.lvccld.org/special_collections/medical/index.htm
- New Hampshire: Dartmouth Biomedical Libraries (Dartmouth College Library, Hanover), http://www.dartmouth.edu/~biomed/resources.htmld/conshealth.htmld/
- New Jersey: Consumer Health Library (Rahway Hospital, Rahway), http://www.rahwayhospital.com/library.htm
- New Jersey: Dr. Walter Phillips Health Sciences Library (Englewood Hospital and Medical Center, Englewood), http://www.englewoodhospital.com/links/index.htm
- **New Jersey:** Meland Foundation (Englewood Hospital and Medical Center, Englewood), http://www.geocities.com/ResearchTriangle/9360/
- New York: Choices in Health Information (New York Public Library) NLM Consumer Pilot Project participant, http://www.nypl.org/branch/health/links.html
- New York: Health Information Center (Upstate Medical University, State University of New York, Syracuse), http://www.upstate.edu/library/hic/
- New York: Health Sciences Library (Long Island Jewish Medical Center, New Hyde Park), http://www.lij.edu/library/library.html
- New York: ViaHealth Medical Library (Rochester General Hospital), http://www.nyam.org/library/
- **Ohio:** Consumer Health Library (Akron General Medical Center, Medical & Consumer Health Library), http://www.akrongeneral.org/hwlibrary.htm
- **Oklahoma:** The Health Information Center at Saint Francis Hospital (Saint Francis Health System, Tulsa), http://www.sfh-tulsa.com/services/healthinfo.asp
- Oregon: Planetree Health Resource Center (Mid-Columbia Medical Center, The Dalles), http://www.mcmc.net/phrc/
- **Pennsylvania:** Community Health Information Library (Milton S. Hershey Medical Center, Hershey), http://www.hmc.psu.edu/commhealth/
- **Pennsylvania:** Community Health Resource Library (Geisinger Medical Center, Danville), http://www.geisinger.edu/education/commlib.shtml
- **Pennsylvania:** HealthInfo Library (Moses Taylor Hospital, Scranton), http://www.mth.org/healthwellness.html
- **Pennsylvania:** Hopwood Library (University of Pittsburgh, Health Sciences Library System, Pittsburgh), http://www.hsls.pitt.edu/guides/chi/hopwood/index_html
- **Pennsylvania:** Koop Community Health Information Center (College of Physicians of Philadelphia), http://www.collphyphil.org/kooppg1.shtml
- **Pennsylvania:** Learning Resources Center Medical Library (Susquehanna Health System, Williamsport), http://www.shscares.org/services/lrc/index.asp
- **Pennsylvania:** Medical Library (UPMC Health System, Pittsburgh), http://www.upmc.edu/passavant/library.htm
- Quebec, Canada: Medical Library (Montreal General Hospital), http://www.mghlib.mcgill.ca/

- 46 Cerebral Vascular Accident
- **South Dakota:** Rapid City Regional Hospital Medical Library (Rapid City Regional Hospital), http://www.rcrh.org/Services/Library/Default.asp
- **Texas:** Houston HealthWays (Houston Academy of Medicine-Texas Medical Center Library), http://hhw.library.tmc.edu/
- Washington: Community Health Library (Kittitas Valley Community Hospital), http://www.kvch.com/
- Washington: Southwest Washington Medical Center Library (Southwest Washington Medical Center, Vancouver), http://www.swmedicalcenter.com/body.cfm?id=72

ONLINE GLOSSARIES

The Internet provides access to a number of free-to-use medical dictionaries. The National Library of Medicine has compiled the following list of online dictionaries:

- ADAM Medical Encyclopedia (A.D.A.M., Inc.), comprehensive medical reference: http://www.nlm.nih.gov/medlineplus/encyclopedia.html
- MedicineNet.com Medical Dictionary (MedicineNet, Inc.): http://www.medterms.com/Script/Main/hp.asp
- Merriam-Webster Medical Dictionary (Inteli-Health, Inc.): http://www.intelihealth.com/IH/
- Multilingual Glossary of Technical and Popular Medical Terms in Eight European Languages (European Commission) - Danish, Dutch, English, French, German, Italian, Portuguese, and Spanish: http://allserv.rug.ac.be/~rvdstich/eugloss/welcome.html
- On-line Medical Dictionary (CancerWEB): http://cancerweb.ncl.ac.uk/omd/
- Rare Diseases Terms (Office of Rare Diseases): http://ord.aspensys.com/asp/diseases/diseases.asp
- Technology Glossary (National Library of Medicine) Health Care Technology: http://www.nlm.nih.gov/nichsr/ta101/ta10108.htm

Beyond these, MEDLINEplus contains a very patient-friendly encyclopedia covering every aspect of medicine (licensed from A.D.A.M., Inc.). The ADAM Medical Encyclopedia can be accessed at http://www.nlm.nih.gov/medlineplus/encyclopedia.html. ADAM is also available on commercial Web sites such as drkoop.com (http://www.drkoop.com/) and Web MD (http://my.webmd.com/adam/asset/adam_disease_articles/a_to_z/a).

Online Dictionary Directories

The following are additional online directories compiled by the National Library of Medicine, including a number of specialized medical dictionaries:

- Medical Dictionaries: Medical & Biological (World Health Organization): http://www.who.int/hlt/virtuallibrary/English/diction.htm#Medical
- MEL-Michigan Electronic Library List of Online Health and Medical Dictionaries (Michigan Electronic Library): http://mel.lib.mi.us/health/health-dictionaries.html
- Patient Education: Glossaries (DMOZ Open Directory Project): http://dmoz.org/Health/Education/Patient_Education/Glossaries/
- Web of Online Dictionaries (Bucknell University): http://www.yourdictionary.com/diction5.html#medicine

CEREBRAL VASCULAR ACCIDENT DICTIONARY

The definitions below are derived from official public sources, including the National Institutes of Health [NIH] and the European Union [EU].

Acceptor: A substance which, while normally not oxidized by oxygen or reduced by hydrogen, can be oxidized or reduced in presence of a substance which is itself undergoing oxidation or reduction. [NIH]

Acetylcholine: A neurotransmitter. Acetylcholine in vertebrates is the major transmitter at neuromuscular junctions, autonomic ganglia, parasympathetic effector junctions, a subset of sympathetic effector junctions, and at many sites in the central nervous system. It is generally not used as an administered drug because it is broken down very rapidly by cholinesterases, but it is useful in some ophthalmological applications. [NIH]

Acute renal: A condition in which the kidneys suddenly stop working. In most cases, kidneys can recover from almost complete loss of function. [NIH]

Adenoma: A benign epithelial tumor with a glandular organization. [NIH]

Adrenal Medulla: The inner part of the adrenal gland; it synthesizes, stores and releases catecholamines. [NIH]

Aerobic: In biochemistry, reactions that need oxygen to happen or happen when oxygen is present. [NIH]

Algorithms: A procedure consisting of a sequence of algebraic formulas and/or logical steps to calculate or determine a given task. [NIH]

Alternative medicine: Practices not generally recognized by the medical community as standard or conventional medical approaches and used instead of standard treatments. Alternative medicine includes the taking of dietary supplements, megadose vitamins, and herbal preparations; the drinking of special teas; and practices such as massage therapy, magnet therapy, spiritual healing, and meditation. [NIH]

Anaemia: A reduction below normal in the number of erythrocytes per cu. mm., in the quantity of haemoglobin, or in the volume of packed red cells per 100 ml. of blood which occurs when the equilibrium between blood loss (through bleeding or destruction) and blood production is disturbed. [EU]

Anal: Having to do with the anus, which is the posterior opening of the large bowel. [NIH]

Anatomical: Pertaining to anatomy, or to the structure of the organism. [EU]

Anemia: A reduction in the number of circulating erythrocytes or in the quantity of hemoglobin. [NIH]

Anesthetics: Agents that are capable of inducing a total or partial loss of sensation, especially tactile sensation and pain. They may act to induce general anesthesia, in which an unconscious state is achieved, or may act locally to induce numbress or lack of sensation at a targeted site. [NIH]

Angina: Chest pain that originates in the heart. [NIH]

Angina Pectoris: The symptom of paroxysmal pain consequent to myocardial ischemia usually of distinctive character, location and radiation, and provoked by a transient stressful situation during which the oxygen requirements of the myocardium exceed the capacity of

the coronary circulation to supply it. [NIH]

Angiography: Radiography of blood vessels after injection of a contrast medium. [NIH]

Anthropometry: The technique that deals with the measurement of the size, weight, and proportions of the human or other primate body. [NIH]

Antiarrhythmic: An agent that prevents or alleviates cardiac arrhythmia. [EU]

Antibodies: Immunoglobulin molecules having a specific amino acid sequence by virtue of which they interact only with the antigen that induced their synthesis in cells of the lymphoid series (especially plasma cells), or with an antigen closely related to it. [NIH]

Antibodies, Anticardiolipin: Antiphospholipid antibodies found in association with systemic lupus erythematosus (lupus erythematosus, systemic), antiphospholipid syndrome, and in a variety of other diseases as well as in healthy individuals. The antibodies are detected by solid-phase immunoassay employing the purified phospholipid antigen cardiolipin. [NIH]

Antibodies, Antiphospholipid: Autoantibodies directed against phospholipids. These antibodies are characteristically found in patients with systemic lupus erythematosus, antiphospholipid syndrome, related autoimmune diseases, some non-autoimmune diseases, and also in healthy individuals. [NIH]

Anticoagulant: A drug that helps prevent blood clots from forming. Also called a blood thinner. [NIH]

Antidepressant: A drug used to treat depression. [NIH]

Antiphospholipid Syndrome: The presence of antibodies directed against phospholipids (antibodies, antiphospholipid). The condition is associated with a variety of diseases, notably systemic lupus erythematosus and other connective tissue diseases, thrombopenia, and arterial or venous thromboses. In pregnancy it can cause abortion. Of the phospholipids, the cardiolipins show markedly elevated levels of anticardiolipin antibodies (antibodies, anticardiolipin). Present also are high levels of lupus anticoagulant (lupus coagulation inhibitor). [NIH]

Aorta: The main trunk of the systemic arteries. [NIH]

Aphasia: A cognitive disorder marked by an impaired ability to comprehend or express language in its written or spoken form. This condition is caused by diseases which affect the language areas of the dominant hemisphere. Clinical features are used to classify the various subtypes of this condition. General categories include receptive, expressive, and mixed forms of aphasia. [NIH]

Apoptosis: One of the two mechanisms by which cell death occurs (the other being the pathological process of necrosis). Apoptosis is the mechanism responsible for the physiological deletion of cells and appears to be intrinsically programmed. It is characterized by distinctive morphologic changes in the nucleus and cytoplasm, chromatin cleavage at regularly spaced sites, and the endonucleolytic cleavage of genomic DNA (DNA fragmentation) at internucleosomal sites. This mode of cell death serves as a balance to mitosis in regulating the size of animal tissues and in mediating pathologic processes associated with tumor growth. [NIH]

Arginine: An essential amino acid that is physiologically active in the L-form. [NIH]

Arterial: Pertaining to an artery or to the arteries. [EU]

Arteries: The vessels carrying blood away from the heart. [NIH]

Arteritis: Inflammation of an artery. [NIH]

Artery: Vessel-carrying blood from the heart to various parts of the body. [NIH]

Ascites: Accumulation or retention of free fluid within the peritoneal cavity. [NIH]

Asymptomatic: Having no signs or symptoms of disease. [NIH]

Atrial: Pertaining to an atrium. [EU]

Atrial Fibrillation: Disorder of cardiac rhythm characterized by rapid, irregular atrial impulses and ineffective atrial contractions. [NIH]

Atrium: A chamber; used in anatomical nomenclature to designate a chamber affording entrance to another structure or organ. Usually used alone to designate an atrium of the heart. [EU]

Bacteria: Unicellular prokaryotic microorganisms which generally possess rigid cell walls, multiply by cell division, and exhibit three principal forms: round or coccal, rodlike or bacillary, and spiral or spirochetal. [NIH]

Bacterium: Microscopic organism which may have a spherical, rod-like, or spiral unicellular or non-cellular body. Bacteria usually reproduce through asexual processes. [NIH]

Barbiturate: A drug with sedative and hypnotic effects. Barbiturates have been used as sedatives and anesthetics, and they have been used to treat the convulsions associated with epilepsy. [NIH]

Base: In chemistry, the nonacid part of a salt; a substance that combines with acids to form salts; a substance that dissociates to give hydroxide ions in aqueous solutions; a substance whose molecule or ion can combine with a proton (hydrogen ion); a substance capable of donating a pair of electrons (to an acid) for the formation of a coordinate covalent bond. [EU]

Benign: Not cancerous; does not invade nearby tissue or spread to other parts of the body. [NIH]

Beta-Thalassemia: A disorder characterized by reduced synthesis of the beta chains of hemoglobin. There is retardation of hemoglobin A synthesis in the heterozygous form (thalassemia minor), which is asymptomatic, while in the homozygous form (thalassemia major, Cooley's anemia, Mediterranean anemia, erythroblastic anemia), which can result in severe complications and even death, hemoglobin A synthesis is absent. [NIH]

Bile: An emulsifying agent produced in the liver and secreted into the duodenum. Its composition includes bile acids and salts, cholesterol, and electrolytes. It aids digestion of fats in the duodenum. [NIH]

Biological Transport: The movement of materials (including biochemical substances and drugs) across cell membranes and epithelial layers, usually by passive diffusion. [NIH]

Biopsy: Removal and pathologic examination of specimens in the form of small pieces of tissue from the living body. [NIH]

Biotechnology: Body of knowledge related to the use of organisms, cells or cell-derived constituents for the purpose of developing products which are technically, scientifically and clinically useful. Alteration of biologic function at the molecular level (i.e., genetic engineering) is a central focus; laboratory methods used include transfection and cloning technologies, sequence and structure analysis algorithms, computer databases, and gene and protein structure function analysis and prediction. [NIH]

Bladder: The organ that stores urine. [NIH]

Blood Glucose: Glucose in blood. [NIH]

Blood pressure: The pressure of blood against the walls of a blood vessel or heart chamber. Unless there is reference to another location, such as the pulmonary artery or one of the heart chambers, it refers to the pressure in the systemic arteries, as measured, for example, in the forearm. [NIH]

52 Cerebral Vascular Accident

Blood vessel: A tube in the body through which blood circulates. Blood vessels include a network of arteries, arterioles, capillaries, venules, and veins. [NIH]

Bowel: The long tube-shaped organ in the abdomen that completes the process of digestion. There is both a small and a large bowel. Also called the intestine. [NIH]

Bowel Movement: Body wastes passed through the rectum and anus. [NIH]

Bradykinin: A nonapeptide messenger that is enzymatically produced from kallidin in the blood where it is a potent but short-lived agent of arteriolar dilation and increased capillary permeability. Bradykinin is also released from mast cells during asthma attacks, from gut walls as a gastrointestinal vasodilator, from damaged tissues as a pain signal, and may be a neurotransmitter. [NIH]

Cardiac: Having to do with the heart. [NIH]

Cardiac arrest: A sudden stop of heart function. [NIH]

Cardiolipins: Acidic phospholipids composed of two molecules of phosphatidic acid covalently linked to a molecule of glycerol. They occur primarily in mitochondrial inner membranes and in bacterial plasma membranes. They are the main antigenic components of the Wassermann-type antigen that is used in nontreponemal syphilis serodiagnosis. [NIH]

Cardioversion: Electrical reversion of cardiac arrhythmias to normal sinus rhythm, formerly using alternatic current, but now employing direct current. [NIH]

Case report: A detailed report of the diagnosis, treatment, and follow-up of an individual patient. Case reports also contain some demographic information about the patient (for example, age, gender, ethnic origin). [NIH]

Catalyse: To speed up a chemical reaction. [EU]

Cause of Death: Factors which produce cessation of all vital bodily functions. They can be analyzed from an epidemiologic viewpoint. [NIH]

Cell: The individual unit that makes up all of the tissues of the body. All living things are made up of one or more cells. [NIH]

Cell Death: The termination of the cell's ability to carry out vital functions such as metabolism, growth, reproduction, responsiveness, and adaptability. [NIH]

Central Nervous System: The main information-processing organs of the nervous system, consisting of the brain, spinal cord, and meninges. [NIH]

Cerebral: Of or pertaining of the cerebrum or the brain. [EU]

Cerebral Arteries: The arteries supplying the cerebral cortex. [NIH]

Cerebrospinal: Pertaining to the brain and spinal cord. [EU]

Cerebrospinal fluid: CSF. The fluid flowing around the brain and spinal cord. Cerebrospinal fluid is produced in the ventricles in the brain. [NIH]

Cerebrovascular: Pertaining to the blood vessels of the cerebrum, or brain. [EU]

Cerebrum: The largest part of the brain. It is divided into two hemispheres, or halves, called the cerebral hemispheres. The cerebrum controls muscle functions of the body and also controls speech, emotions, reading, writing, and learning. [NIH]

Cervical: Relating to the neck, or to the neck of any organ or structure. Cervical lymph nodes are located in the neck; cervical cancer refers to cancer of the uterine cervix, which is the lower, narrow end (the "neck") of the uterus. [NIH]

Cervix: The lower, narrow end of the uterus that forms a canal between the uterus and vagina. [NIH]

Character: In current usage, approximately equivalent to personality. The sum of the

relatively fixed personality traits and habitual modes of response of an individual. [NIH]

Chin: The anatomical frontal portion of the mandible, also known as the mentum, that contains the line of fusion of the two separate halves of the mandible (symphysis menti). This line of fusion divides inferiorly to enclose a triangular area called the mental protuberance. On each side, inferior to the second premolar tooth, is the mental foramen for the passage of blood vessels and a nerve. [NIH]

Chromatin: The material of chromosomes. It is a complex of DNA, histones, and nonhistone proteins (chromosomal proteins, non-histone) found within the nucleus of a cell. [NIH]

Chronic: A disease or condition that persists or progresses over a long period of time. [NIH]

Clinical trial: A research study that tests how well new medical treatments or other interventions work in people. Each study is designed to test new methods of screening, prevention, diagnosis, or treatment of a disease. [NIH]

Cloning: The production of a number of genetically identical individuals; in genetic engineering, a process for the efficient replication of a great number of identical DNA molecules. [NIH]

Coagulation: 1. The process of clot formation. 2. In colloid chemistry, the solidification of a sol into a gelatinous mass; an alteration of a disperse phase or of a dissolved solid which causes the separation of the system into a liquid phase and an insoluble mass called the clot or curd. Coagulation is usually irreversible. 3. In surgery, the disruption of tissue by physical means to form an amorphous residuum, as in electrocoagulation and photocoagulation. [EU]

Complement: A term originally used to refer to the heat-labile factor in serum that causes immune cytolysis, the lysis of antibody-coated cells, and now referring to the entire functionally related system comprising at least 20 distinct serum proteins that is the effector not only of immune cytolysis but also of other biologic functions. Complement activation occurs by two different sequences, the classic and alternative pathways. The proteins of the classic pathway are termed 'components of complement' and are designated by the symbols C1 through C9. C1 is a calcium-dependent complex of three distinct proteins C1q, C1r and C1s. The proteins of the alternative pathway (collectively referred to as the properdin system) and complement regulatory proteins are known by semisystematic or trivial names. Fragments resulting from proteolytic cleavage of complement proteins are designated with lower-case letter suffixes, e.g., C3a. Inactivated fragments may be designated with the suffix 'i', e.g. C3bi. Activated components or complexes with biological activity are designated by a bar over the symbol e.g. C1 or C4b,2a. The classic pathway is activated by the binding of C1 to classic pathway activators, primarily antigen-antibody complexes containing IgM, IgG1, IgG3; C1q binds to a single IgM molecule or two adjacent IgG molecules. The alternative pathway can be activated by IgA immune complexes and also by nonimmunologic materials including bacterial endotoxins, microbial polysaccharides, and cell walls. Activation of the classic pathway triggers an enzymatic cascade involving C1, C4, C2 and C3; activation of the alternative pathway triggers a cascade involving C3 and factors B, D and P. Both result in the cleavage of C5 and the formation of the membrane attack complex. Complement activation also results in the formation of many biologically active complement fragments that act as anaphylatoxins, opsonins, or chemotactic factors. [EU]

Complementary and alternative medicine: CAM. Forms of treatment that are used in addition to (complementary) or instead of (alternative) standard treatments. These practices are not considered standard medical approaches. CAM includes dietary supplements, megadose vitamins, herbal preparations, special teas, massage therapy, magnet therapy, spiritual healing, and meditation. [NIH]

Complementary medicine: Practices not generally recognized by the medical community as

standard or conventional medical approaches and used to enhance or complement the standard treatments. Complementary medicine includes the taking of dietary supplements, megadose vitamins, and herbal preparations; the drinking of special teas; and practices such as massage therapy, magnet therapy, spiritual healing, and meditation. [NIH]

Computational Biology: A field of biology concerned with the development of techniques for the collection and manipulation of biological data, and the use of such data to make biological discoveries or predictions. This field encompasses all computational methods and theories applicable to molecular biology and areas of computer-based techniques for solving biological problems including manipulation of models and datasets. [NIH]

Conjunctiva: The mucous membrane that lines the inner surface of the eyelids and the anterior part of the sclera. [NIH]

Connective Tissue: Tissue that supports and binds other tissues. It consists of connective tissue cells embedded in a large amount of extracellular matrix. [NIH]

Connective Tissue: Tissue that supports and binds other tissues. It consists of connective tissue cells embedded in a large amount of extracellular matrix. [NIH]

Connective Tissue Diseases: A heterogeneous group of disorders, some hereditary, others acquired, characterized by abnormal structure or function of one or more of the elements of connective tissue, i.e., collagen, elastin, or the mucopolysaccharides. [NIH]

Consciousness: Sense of awareness of self and of the environment. [NIH]

Continence: The ability to hold in a bowel movement or urine. [NIH]

Contraindications: Any factor or sign that it is unwise to pursue a certain kind of action or treatment, e. g. giving a general anesthetic to a person with pneumonia. [NIH]

Contrast medium: A substance that is introduced into or around a structure and, because of the difference in absorption of x-rays by the contrast medium and the surrounding tissues, allows radiographic visualization of the structure. [EU]

Convulsions: A general term referring to sudden and often violent motor activity of cerebral or brainstem origin. Convulsions may also occur in the absence of an electrical cerebral discharge (e.g., in response to hypotension). [NIH]

Convulsive: Relating or referring to spasm; affected with spasm; characterized by a spasm or spasms. [NIH]

Coronary: Encircling in the manner of a crown; a term applied to vessels; nerves, ligaments, etc. The term usually denotes the arteries that supply the heart muscle and, by extension, a pathologic involvement of them. [EU]

Coronary Circulation: The circulation of blood through the coronary vessels of the heart. [NIH]

Coronary Thrombosis: Presence of a thrombus in a coronary artery, often causing a myocardial infarction. [NIH]

Cortex: The outer layer of an organ or other body structure, as distinguished from the internal substance. [EU]

Cortical: Pertaining to or of the nature of a cortex or bark. [EU]

Cranial: Pertaining to the cranium, or to the anterior (in animals) or superior (in humans) end of the body. [EU]

Cyclic: Pertaining to or occurring in a cycle or cycles; the term is applied to chemical compounds that contain a ring of atoms in the nucleus. [EU]

Cyst: A sac or capsule filled with fluid. [NIH]

Cytoplasm: The protoplasm of a cell exclusive of that of the nucleus; it consists of a continuous aqueous solution (cytosol) and the organelles and inclusions suspended in it (phaneroplasm), and is the site of most of the chemical activities of the cell. [EU]

Deletion: A genetic rearrangement through loss of segments of DNA (chromosomes), bringing sequences, which are normally separated, into close proximity. [NIH]

Dendrites: Extensions of the nerve cell body. They are short and branched and receive stimuli from other neurons. [NIH]

Dental Hygienists: Persons trained in an accredited school or dental college and licensed by the state in which they reside to provide dental prophylaxis under the direction of a licensed dentist. [NIH]

Diagnostic procedure: A method used to identify a disease. [NIH]

Diastolic: Of or pertaining to the diastole. [EU]

Diffusion: The tendency of a gas or solute to pass from a point of higher pressure or concentration to a point of lower pressure or concentration and to distribute itself throughout the available space; a major mechanism of biological transport. [NIH]

Digestion: The process of breakdown of food for metabolism and use by the body. [NIH]

Direct: 1. Straight; in a straight line. 2. Performed immediately and without the intervention of subsidiary means. [EU]

Dissection: Cutting up of an organism for study. [NIH]

Distal: Remote; farther from any point of reference; opposed to proximal. In dentistry, used to designate a position on the dental arch farther from the median line of the jaw. [EU]

Edema: Excessive amount of watery fluid accumulated in the intercellular spaces, most commonly present in subcutaneous tissue. [NIH]

Efficacy: The extent to which a specific intervention, procedure, regimen, or service produces a beneficial result under ideal conditions. Ideally, the determination of efficacy is based on the results of a randomized control trial. [NIH]

Emboli: Bit of foreign matter which enters the blood stream at one point and is carried until it is lodged or impacted in an artery and obstructs it. It may be a blood clot, an air bubble, fat or other tissue, or clumps of bacteria. [NIH]

Embolization: The blocking of an artery by a clot or foreign material. Embolization can be done as treatment to block the flow of blood to a tumor. [NIH]

Embolus: Bit of foreign matter which enters the blood stream at one point and is carried until it is lodged or impacted in an artery and obstructs it. It may be a blood clot, an air bubble, fat or other tissue, or clumps of bacteria. [NIH]

Endocarditis: Exudative and proliferative inflammatory alterations of the endocardium, characterized by the presence of vegetations on the surface of the endocardium or in the endocardium itself, and most commonly involving a heart valve, but sometimes affecting the inner lining of the cardiac chambers or the endocardium elsewhere. It may occur as a primary disorder or as a complication of or in association with another disease. [EU]

Endocardium: The innermost layer of the heart, comprised of endothelial cells. [NIH]

Endothelium: A layer of epithelium that lines the heart, blood vessels (endothelium, vascular), lymph vessels (endothelium, lymphatic), and the serous cavities of the body. [NIH]

Endothelium-derived: Small molecule that diffuses to the adjacent muscle layer and relaxes it. [NIH]

Environmental Health: The science of controlling or modifying those conditions, influences,

or forces surrounding man which relate to promoting, establishing, and maintaining health. [NIH]

Enzymes: Biological molecules that possess catalytic activity. They may occur naturally or be synthetically created. Enzymes are usually proteins, however catalytic RNA and catalytic DNA molecules have also been identified. [NIH]

Epidural: The space between the wall of the spinal canal and the covering of the spinal cord. An epidural injection is given into this space. [NIH]

Epinephrine: The active sympathomimetic hormone from the adrenal medulla in most species. It stimulates both the alpha- and beta- adrenergic systems, causes systemic vasoconstriction and gastrointestinal relaxation, stimulates the heart, and dilates bronchi and cerebral vessels. It is used in asthma and cardiac failure and to delay absorption of local anesthetics. [NIH]

Epithelial: Refers to the cells that line the internal and external surfaces of the body. [NIH]

Erythrocyte Transfusion: The transfer of erythrocytes from a donor to a recipient or reinfusion to the donor. [NIH]

Erythrocytes: Red blood cells. Mature erythrocytes are non-nucleated, biconcave disks containing hemoglobin whose function is to transport oxygen. [NIH]

Extensor: A muscle whose contraction tends to straighten a limb; the antagonist of a flexor. [NIH]

Extravasation: A discharge or escape, as of blood, from a vessel into the tissues. [EU]

Family Planning: Programs or services designed to assist the family in controlling reproduction by either improving or diminishing fertility. [NIH]

Fat: Total lipids including phospholipids. [NIH]

Flexion: In gynaecology, a displacement of the uterus in which the organ is bent so far forward or backward that an acute angle forms between the fundus and the cervix. [EU]

Flexor: Muscles which flex a joint. [NIH]

Fundus: The larger part of a hollow organ that is farthest away from the organ's opening. The bladder, gallbladder, stomach, uterus, eye, and cavity of the middle ear all have a fundus. [NIH]

Ganglion: 1. A knot, or knotlike mass. 2. A general term for a group of nerve cell bodies located outside the central nervous system; occasionally applied to certain nuclear groups within the brain or spinal cord, e.g. basal ganglia. 3. A benign cystic tumour occurring on a aponeurosis or tendon, as in the wrist or dorsum of the foot; it consists of a thin fibrous capsule enclosing a clear mucinous fluid. [EU]

Gas: Air that comes from normal breakdown of food. The gases are passed out of the body through the rectum (flatus) or the mouth (burp). [NIH]

Gene: The functional and physical unit of heredity passed from parent to offspring. Genes are pieces of DNA, and most genes contain the information for making a specific protein. [NIH]

Gland: An organ that produces and releases one or more substances for use in the body. Some glands produce fluids that affect tissues or organs. Others produce hormones or participate in blood production. [NIH]

Governing Board: The group in which legal authority is vested for the control of health-related institutions and organizations. [NIH]

Guanylate Cyclase: An enzyme that catalyzes the conversion of GTP to 3',5'-cyclic GMP and pyrophosphate. It also acts on ITP and dGTP. (From Enzyme Nomenclature, 1992) EC

4.6.1.2. [NIH]

Hematoma: An extravasation of blood localized in an organ, space, or tissue. [NIH]

Hemoglobin: One of the fractions of glycosylated hemoglobin A1c. Glycosylated hemoglobin is formed when linkages of glucose and related monosaccharides bind to hemoglobin A and its concentration represents the average blood glucose level over the previous several weeks. HbA1c levels are used as a measure of long-term control of plasma glucose (normal, 4 to 6 percent). In controlled diabetes mellitus, the concentration of glycosylated hemoglobin A is within the normal range, but in uncontrolled cases the level may be 3 to 4 times the normal conentration. Generally, complications are substantially lower among patients with Hb levels of 7 percent or less than in patients with HbA1c levels of 9 percent or more. [NIH]

Hemolytic: A disease that affects the blood and blood vessels. It destroys red blood cells, cells that cause the blood to clot, and the lining of blood vessels. HUS is often caused by the Escherichia coli bacterium in contaminated food. People with HUS may develop acute renal failure. [NIH]

Hemorrhage: Bleeding or escape of blood from a vessel. [NIH]

Hemostasis: The process which spontaneously arrests the flow of blood from vessels carrying blood under pressure. It is accomplished by contraction of the vessels, adhesion and aggregation of formed blood elements, and the process of blood or plasma coagulation. [NIH]

Hereditary: Of, relating to, or denoting factors that can be transmitted genetically from one generation to another. [NIH]

Hormone: A substance in the body that regulates certain organs. Hormones such as gastrin help in breaking down food. Some hormones come from cells in the stomach and small intestine. [NIH]

Hydrocephalus: Excessive accumulation of cerebrospinal fluid within the cranium which may be associated with dilation of cerebral ventricles, intracranial hypertension; headache; lethargy; urinary incontinence; and ataxia (and in infants macrocephaly). This condition may be caused by obstruction of cerebrospinal fluid pathways due to neurologic abnormalities, intracranial hemorrhages; central nervous system infections; brain neoplasms; craniocerebral trauma; and other conditions. Impaired resorption of cerebrospinal fluid from the arachnoid villi results in a communicating form of hydrocephalus. Hydrocephalus ex-vacuo refers to ventricular dilation that occurs as a result of brain substance loss from cerebral infarction and other conditions. [NIH]

Hyperglycemia: Abnormally high blood sugar. [NIH]

Hypertension: Persistently high arterial blood pressure. Currently accepted threshold levels are 140 mm Hg systolic and 90 mm Hg diastolic pressure. [NIH]

Hypnotic: A drug that acts to induce sleep. [EU]

Hypoglycemia: Abnormally low blood sugar [NIH]

Hypoglycemic: An orally active drug that produces a fall in blood glucose concentration. [NIH]

Hypoglycemic Agents: Agents which lower the blood glucose level. [NIH]

Hypotension: Abnormally low blood pressure. [NIH]

Impairment: In the context of health experience, an impairment is any loss or abnormality of psychological, physiological, or anatomical structure or function. [NIH]

Incontinence: Inability to control the flow of urine from the bladder (urinary incontinence) or the escape of stool from the rectum (fecal incontinence). [NIH]

Incontinentia Pigmenti: A genodermatosis occurring mostly in females and characterized by skin changes in three phases - vesiculobullous, verrucous papillomatous, and macular melanodermic. Hyperpigmentation is bizarre and irregular. Sixty percent of patients have abnormalities of eyes, teeth, central nervous system, and skin appendages. [NIH]

Infarction: A pathological process consisting of a sudden insufficient blood supply to an area, which results in necrosis of that area. It is usually caused by a thrombus, an embolus, or a vascular torsion. [NIH]

Infertility: The diminished or absent ability to conceive or produce an offspring while sterility is the complete inability to conceive or produce an offspring. [NIH]

Inflammation: A pathological process characterized by injury or destruction of tissues caused by a variety of cytologic and chemical reactions. It is usually manifested by typical signs of pain, heat, redness, swelling, and loss of function. [NIH]

Infusion: A method of putting fluids, including drugs, into the bloodstream. Also called intravenous infusion. [NIH]

Intermittent: Occurring at separated intervals; having periods of cessation of activity. [EU]

Intracellular: Inside a cell. [NIH]

Intracranial Hypertension: Increased pressure within the cranial vault. This may result from several conditions, including hydrocephalus; brain edema; intracranial masses; severe systemic hypertension; pseudotumor cerebri; and other disorders. [NIH]

Intravascular: Within a vessel or vessels. [EU]

Kb: A measure of the length of DNA fragments, 1 Kb = 1000 base pairs. The largest DNA fragments are up to 50 kilobases long. [NIH]

Keto: It consists of 8 carbon atoms and within the endotoxins, it connects poysaccharide and lipid A. [NIH]

Length of Stay: The period of confinement of a patient to a hospital or other health facility. [NIH]

Lesion: An area of abnormal tissue change. [NIH]

Ligaments: Shiny, flexible bands of fibrous tissue connecting together articular extremities of bones. They are pliant, tough, and inextensile. [NIH]

Liver: A large, glandular organ located in the upper abdomen. The liver cleanses the blood and aids in digestion by secreting bile. [NIH]

Localized: Cancer which has not metastasized yet. [NIH]

Long-Term Potentiation: A persistent increase in synaptic efficacy, usually induced by appropriate activation of the same synapses. The phenomenological properties of long-term potentiation suggest that it may be a cellular mechanism of learning and memory. [NIH]

Lumbar: Pertaining to the loins, the part of the back between the thorax and the pelvis. [EU]

Lupus: A form of cutaneous tuberculosis. It is seen predominantly in women and typically involves the nasal, buccal, and conjunctival mucosa. [NIH]

Lymph: The almost colorless fluid that travels through the lymphatic system and carries cells that help fight infection and disease. [NIH]

Lymph node: A rounded mass of lymphatic tissue that is surrounded by a capsule of connective tissue. Also known as a lymph gland. Lymph nodes are spread out along lymphatic vessels and contain many lymphocytes, which filter the lymphatic fluid (lymph). [NIH]

Lymphedema: Edema due to obstruction of lymph vessels or disorders of the lymph nodes.

[NIH]

Mandibular Nerve: A branch of the trigeminal (5th cranial) nerve. The mandibular nerve carries motor fibers to the muscles of mastication and sensory fibers to the teeth and gingivae, the face in the region of the mandible, and parts of the dura. [NIH]

Mastication: The act and process of chewing and grinding food in the mouth. [NIH]

Maxillary: Pertaining to the maxilla : the irregularly shaped bone that with its fellow forms the upper jaw. [EU]

Medical Records: Recording of pertinent information concerning patient's illness or illnesses. [NIH]

MEDLINE: An online database of MEDLARS, the computerized bibliographic Medical Literature Analysis and Retrieval System of the National Library of Medicine. [NIH]

Medullary: Pertaining to the marrow or to any medulla; resembling marrow. [EU]

Membranes: Thin layers of tissue which cover parts of the body, separate adjacent cavities, or connect adjacent structures. [NIH]

Memory: Complex mental function having four distinct phases: (1) memorizing or learning, (2) retention, (3) recall, and (4) recognition. Clinically, it is usually subdivided into immediate, recent, and remote memory. [NIH]

Mental: Pertaining to the mind; psychic. 2. (L. mentum chin) pertaining to the chin. [EU]

Microbe: An organism which cannot be observed with the naked eye; e. g. unicellular animals, lower algae, lower fungi, bacteria. [NIH]

Middle Cerebral Artery: The largest and most complex of the cerebral arteries. Branches of the middle cerebral artery supply the insular region, motor and premotor areas, and large regions of the association cortex. [NIH]

Mitosis: A method of indirect cell division by means of which the two daughter nuclei normally receive identical complements of the number of chromosomes of the somatic cells of the species. [NIH]

Mitral Valve: The valve between the left atrium and left ventricle of the heart. [NIH]

Modification: A change in an organism, or in a process in an organism, that is acquired from its own activity or environment. [NIH]

Molecular: Of, pertaining to, or composed of molecules : a very small mass of matter. [EU]

Morphine: The principal alkaloid in opium and the prototype opiate analgesic and narcotic. Morphine has widespread effects in the central nervous system and on smooth muscle. [NIH]

Multiple Trauma: Physical insults or injuries occurring simultaneously in several parts of the body. [NIH]

Multivariate Analysis: A set of techniques used when variation in several variables has to be studied simultaneously. In statistics, multivariate analysis is interpreted as any analytic method that allows simultaneous study of two or more dependent variables. [NIH]

Myelin: The fatty substance that covers and protects nerves. [NIH]

Myelin Sheath: The lipid-rich sheath investing many axons in both the central and peripheral nervous systems. The myelin sheath is an electrical insulator and allows faster and more energetically efficient conduction of impulses. The sheath is formed by the cell membranes of glial cells (Schwann cells in the peripheral and oligodendroglia in the central nervous system). Deterioration of the sheath in demyelinating diseases is a serious clinical problem. [NIH]

Myocardial infarction: Gross necrosis of the myocardium as a result of interruption of the

blood supply to the area; it is almost always caused by atherosclerosis of the coronary arteries, upon which coronary thrombosis is usually superimposed. [NIH]

Myocardial Ischemia: A disorder of cardiac function caused by insufficient blood flow to the muscle tissue of the heart. The decreased blood flow may be due to narrowing of the coronary arteries (coronary arteriosclerosis), to obstruction by a thrombus (coronary thrombosis), or less commonly, to diffuse narrowing of arterioles and other small vessels within the heart. Severe interruption of the blood supply to the myocardial tissue may result in necrosis of cardiac muscle (myocardial infarction). [NIH]

Myocardium: The muscle tissue of the heart composed of striated, involuntary muscle known as cardiac muscle. [NIH]

Narcosis: A general and nonspecific reversible depression of neuronal excitability, produced by a number of physical and chemical aspects, usually resulting in stupor. [NIH]

Narcotic: 1. Pertaining to or producing narcosis. 2. An agent that produces insensibility or stupor, applied especially to the opioids, i.e. to any natural or synthetic drug that has morphine-like actions. [EU]

Necrosis: A pathological process caused by the progressive degradative action of enzymes that is generally associated with severe cellular trauma. It is characterized by mitochondrial swelling, nuclear flocculation, uncontrolled cell lysis, and ultimately cell death. [NIH]

Nervous System: The entire nerve apparatus composed of the brain, spinal cord, nerves and ganglia. [NIH]

Neurologic: Having to do with nerves or the nervous system. [NIH]

Neurons: The basic cellular units of nervous tissue. Each neuron consists of a body, an axon, and dendrites. Their purpose is to receive, conduct, and transmit impulses in the nervous system. [NIH]

Neurotransmitter: Any of a group of substances that are released on excitation from the axon terminal of a presynaptic neuron of the central or peripheral nervous system and travel across the synaptic cleft to either excite or inhibit the target cell. Among the many substances that have the properties of a neurotransmitter are acetylcholine, norepinephrine, epinephrine, dopamine, glycine, y-aminobutyrate, glutamic acid, substance P, enkephalins, endorphins, and serotonin. [EU]

Nitric Oxide: A free radical gas produced endogenously by a variety of mammalian cells. It is synthesized from arginine by a complex reaction, catalyzed by nitric oxide synthase. Nitric oxide is endothelium-derived relaxing factor. It is released by the vascular endothelium and mediates the relaxation induced by some vasodilators such as acetylcholine and bradykinin. It also inhibits platelet aggregation, induces disaggregation of aggregated platelets, and inhibits platelet adhesion to the vascular endothelium. Nitric oxide activates cytosolic guanylate cyclase and thus elevates intracellular levels of cyclic GMP. [NIH]

Norepinephrine: Precursor of epinephrine that is secreted by the adrenal medulla and is a widespread central and autonomic neurotransmitter. Norepinephrine is the principal transmitter of most postganglionic sympathetic fibers and of the diffuse projection system in the brain arising from the locus ceruleus. It is also found in plants and is used pharmacologically as a sympathomimetic. [NIH]

Nucleus: A body of specialized protoplasm found in nearly all cells and containing the chromosomes. [NIH]

Nursing Care: Care given to patients by nursing service personnel. [NIH]

Occupational Therapy: The field concerned with utilizing craft or work activities in the

rehabilitation of patients. Occupational therapy can also refer to the activities themselves. [NIH]

Ophthalmic: Pertaining to the eye. [EU]

Oral Health: The optimal state of the mouth and normal functioning of the organs of the mouth without evidence of disease. [NIH]

Ovarian Hyperstimulation Syndrome: Syndrome composed of a combination of ovarian enlargement and an acute fluid shift out of the intravascular space. The enlargement is caused by ovarian cyst formation and the fluid shift may result in ascites, hydrothorax, or generalized edema. The syndrome is most usually seen as a complication of ovulation induction, a treatment for infertility. [NIH]

Overactive bladder: A condition in which the patient experiences two or all three of the following conditions: [NIH]

Overdose: An accidental or deliberate dose of a medication or street drug that is in excess of what is normally used. [NIH]

Ovulation: The discharge of a secondary oocyte from a ruptured graafian follicle. [NIH]

Ovulation Induction: Techniques for the artifical induction of ovulation. [NIH]

Paroxysmal: Recurring in paroxysms (= spasms or seizures). [EU]

Pathologic: 1. Indicative of or caused by a morbid condition. 2. Pertaining to pathology (= branch of medicine that treats the essential nature of the disease, especially the structural and functional changes in tissues and organs of the body caused by the disease). [EU]

Pathologic Processes: The abnormal mechanisms and forms involved in the dysfunctions of tissues and organs. [NIH]

Pelvis: The lower part of the abdomen, located between the hip bones. [NIH]

Perception: The ability quickly and accurately to recognize similarities and differences among presented objects, whether these be pairs of words, pairs of number series, or multiple sets of these or other symbols such as geometric figures. [NIH]

Percutaneous: Performed through the skin, as injection of radiopacque material in radiological examination, or the removal of tissue for biopsy accomplished by a needle. [EU]

Perfusion: Bathing an organ or tissue with a fluid. In regional perfusion, a specific area of the body (usually an arm or a leg) receives high doses of anticancer drugs through a blood vessel. Such a procedure is performed to treat cancer that has not spread. [NIH]

Pharmacologic: Pertaining to pharmacology or to the properties and reactions of drugs. [EU]

Phospholipids: Lipids containing one or more phosphate groups, particularly those derived from either glycerol (phosphoglycerides; glycerophospholipids) or sphingosine (sphingolipids). They are polar lipids that are of great importance for the structure and function of cell membranes and are the most abundant of membrane lipids, although not stored in large amounts in the system. [NIH]

Placenta: A highly vascular fetal organ through which the fetus absorbs oxygen and other nutrients and excretes carbon dioxide and other wastes. It begins to form about the eighth day of gestation when the blastocyst adheres to the decidua. [NIH]

Plants: Multicellular, eukaryotic life forms of the kingdom Plantae. They are characterized by a mainly photosynthetic mode of nutrition; essentially unlimited growth at localized regions of cell divisions (meristems); cellulose within cells providing rigidity; the absence of organs of locomotion; absense of nervous and sensory systems; and an alteration of haploid and diploid generations. [NIH]

Plasma: The clear, yellowish, fluid part of the blood that carries the blood cells. The proteins

that form blood clots are in plasma. [NIH]

Platelet Aggregation: The attachment of platelets to one another. This clumping together can be induced by a number of agents (e.g., thrombin, collagen) and is part of the mechanism leading to the formation of a thrombus. [NIH]

Platelets: A type of blood cell that helps prevent bleeding by causing blood clots to form. Also called thrombocytes. [NIH]

Pneumonia: Inflammation of the lungs. [NIH]

Polymorphism: The occurrence together of two or more distinct forms in the same population. [NIH]

Polypeptide: A peptide which on hydrolysis yields more than two amino acids; called tripeptides, tetrapeptides, etc. according to the number of amino acids contained. [EU]

Postoperative: After surgery. [NIH]

Postural: Pertaining to posture or position. [EU]

Practice Guidelines: Directions or principles presenting current or future rules of policy for the health care practitioner to assist him in patient care decisions regarding diagnosis, therapy, or related clinical circumstances. The guidelines may be developed by government agencies at any level, institutions, professional societies, governing boards, or by the convening of expert panels. The guidelines form a basis for the evaluation of all aspects of health care and delivery. [NIH]

Projection: A defense mechanism, operating unconsciously, whereby that which is emotionally unacceptable in the self is rejected and attributed (projected) to others. [NIH]

Prophylaxis: An attempt to prevent disease. [NIH]

Protein S: The vitamin K-dependent cofactor of activated protein C. Together with protein C, it inhibits the action of factors VIIIa and Va. A deficiency in protein S can lead to recurrent venous and arterial thrombosis. [NIH]

Proteins: Polymers of amino acids linked by peptide bonds. The specific sequence of amino acids determines the shape and function of the protein. [NIH]

Proximal: Nearest; closer to any point of reference; opposed to distal. [EU]

Pseudotumor Cerebri: A condition marked by raised intracranial pressure and characterized clinically by headaches; nausea; papilledema, peripheral constriction of the visual fields, transient visual obscurations, and pulsatile tinnitus. Obesity is frequently associated with this condition, which primarily affects women between 20 and 44 years of age. Chronic papilledema may lead to optic nerve injury (optic nerve diseases) and visual loss (blindness). [NIH]

Psychic: Pertaining to the psyche or to the mind; mental. [EU]

Public Policy: A course or method of action selected, usually by a government, from among alternatives to guide and determine present and future decisions. [NIH]

Puerperium: Period from delivery of the placenta until return of the reproductive organs to their normal nonpregnant morphologic state. In humans, the puerperium generally lasts for six to eight weeks. [NIH]

Pulmonary: Relating to the lungs. [NIH]

Pulmonary Edema: An accumulation of an excessive amount of watery fluid in the lungs, may be caused by acute exposure to dangerous concentrations of irritant gasses. [NIH]

Pyridoxal: 3-Hydroxy-5-(hydroxymethyl)-2-methyl-4- pyridinecarboxaldehyde. [NIH]

Quality of Life: A generic concept reflecting concern with the modification and

enhancement of life attributes, e.g., physical, political, moral and social environment. [NIH]

Radiation: Emission or propagation of electromagnetic energy (waves/rays), or the waves/rays themselves; a stream of electromagnetic particles (electrons, neutrons, protons, alpha particles) or a mixture of these. The most common source is the sun. [NIH]

Radiography: Examination of any part of the body for diagnostic purposes by means of roentgen rays, recording the image on a sensitized surface (such as photographic film). [NIH]

Radiological: Pertaining to radiodiagnostic and radiotherapeutic procedures, and interventional radiology or other planning and guiding medical radiology. [NIH]

Rectum: The last 8 to 10 inches of the large intestine. [NIH]

Red blood cells: RBCs. Cells that carry oxygen to all parts of the body. Also called erythrocytes. [NIH]

Refer: To send or direct for treatment, aid, information, de decision. [NIH]

Retrospective: Looking back at events that have already taken place. [NIH]

Retrospective study: A study that looks backward in time, usually using medical records and interviews with patients who already have or had a disease. [NIH]

Reversion: A return to the original condition, e. g. the reappearance of the normal or wild type in previously mutated cells, tissues, or organisms. [NIH]

Risk factor: A habit, trait, condition, or genetic alteration that increases a person's chance of developing a disease. [NIH]

Screening: Checking for disease when there are no symptoms. [NIH]

Sedative: 1. Allaying activity and excitement. 2. An agent that allays excitement. [EU]

Seizures: Clinical or subclinical disturbances of cortical function due to a sudden, abnormal, excessive, and disorganized discharge of brain cells. Clinical manifestations include abnormal motor, sensory and psychic phenomena. Recurrent seizures are usually referred to as epilepsy or "seizure disorder." [NIH]

Self Care: Performance of activities or tasks traditionally performed by professional health care providers. The concept includes care of oneself or one's family and friends. [NIH]

Serum: The clear liquid part of the blood that remains after blood cells and clotting proteins have been removed. [NIH]

Shock: The general bodily disturbance following a severe injury; an emotional or moral upset occasioned by some disturbing or unexpected experience; disruption of the circulation, which can upset all body functions: sometimes referred to as circulatory shock. [NIH]

Signs and Symptoms: Clinical manifestations that can be either objective when observed by a physician, or subjective when perceived by the patient. [NIH]

Social Environment: The aggregate of social and cultural institutions, forms, patterns, and processes that influence the life of an individual or community. [NIH]

Spasm: An involuntary contraction of a muscle or group of muscles. Spasms may involve skeletal muscle or smooth muscle. [NIH]

Spasticity: A state of hypertonicity, or increase over the normal tone of a muscle, with heightened deep tendon reflexes. [EU]

Specialist: In medicine, one who concentrates on 1 special branch of medical science. [NIH]

Spinal cord: The main trunk or bundle of nerves running down the spine through holes in the spinal bone (the vertebrae) from the brain to the level of the lower back. [NIH]

Steroids: Drugs used to relieve swelling and inflammation. [NIH]

Stool: The waste matter discharged in a bowel movement; feces. [NIH]

Stroke: Sudden loss of function of part of the brain because of loss of blood flow. Stroke may be caused by a clot (thrombosis) or rupture (hemorrhage) of a blood vessel to the brain. [NIH]

Stupor: Partial or nearly complete unconsciousness, manifested by the subject's responding only to vigorous stimulation. Also, in psychiatry, a disorder marked by reduced responsiveness. [EU]

Subacute: Somewhat acute; between acute and chronic. [EU]

Sympathomimetic: 1. Mimicking the effects of impulses conveyed by adrenergic postganglionic fibres of the sympathetic nervous system. 2. An agent that produces effects similar to those of impulses conveyed by adrenergic postganglionic fibres of the sympathetic nervous system. Called also adrenergic. [EU]

Symptomatic: Having to do with symptoms, which are signs of a condition or disease. [NIH]

Synapses: Specialized junctions at which a neuron communicates with a target cell. At classical synapses, a neuron's presynaptic terminal releases a chemical transmitter stored in synaptic vesicles which diffuses across a narrow synaptic cleft and activates receptors on the postsynaptic membrane of the target cell. The target may be a dendrite, cell body, or axon of another neuron, or a specialized region of a muscle or secretory cell. Neurons may also communicate through direct electrical connections which are sometimes called electrical synapses; these are not included here but rather in gap junctions. [NIH]

Synaptic: Pertaining to or affecting a synapse (= site of functional apposition between neurons, at which an impulse is transmitted from one neuron to another by electrical or chemical means); pertaining to synapsis (= pairing off in point-for-point association of homologous chromosomes from the male and female pronuclei during the early prophase of meiosis). [EU]

Syncope: A temporary suspension of consciousness due to generalized cerebral schemia, a faint or swoon. [EU]

Systemic: Affecting the entire body. [NIH]

Systemic lupus erythematosus: SLE. A chronic inflammatory connective tissue disease marked by skin rashes, joint pain and swelling, inflammation of the kidneys, inflammation of the fibrous tissue surrounding the heart (i.e., the pericardium), as well as other problems. Not all affected individuals display all of these problems. May be referred to as lupus. [NIH]

Systolic: Indicating the maximum arterial pressure during contraction of the left ventricle of the heart. [EU]

Tachycardia: Excessive rapidity in the action of the heart, usually with a heart rate above 100 beats per minute. [NIH]

Temporal: One of the two irregular bones forming part of the lateral surfaces and base of the skull, and containing the organs of hearing. [NIH]

Tendon: A discrete band of connective tissue mainly composed of parallel bundles of collagenous fibers by which muscles are attached, or two muscles bellies joined. [NIH]

Thalassemia: A group of hereditary hemolytic anemias in which there is decreased synthesis of one or more hemoglobin polypeptide chains. There are several genetic types with clinical pictures ranging from barely detectable hematologic abnormality to severe and fatal anemia. [NIH]

Threshold: For a specified sensory modality (e. g. light, sound, vibration), the lowest level (absolute threshold) or smallest difference (difference threshold, difference limen) or

intensity of the stimulus discernible in prescribed conditions of stimulation. [NIH]

Thrombolytic: 1. Dissolving or splitting up a thrombus. 2. A thrombolytic agent. [EU]

Thrombopenia: Reduction in the number of platelets in the blood. [NIH]

Thromboses: The formation or presence of a blood clot within a blood vessel during life. [NIH]

Thrombosis: The formation or presence of a blood clot inside a blood vessel. [NIH]

Thyroid: A gland located near the windpipe (trachea) that produces thyroid hormone, which helps regulate growth and metabolism. [NIH]

Tissue: A group or layer of cells that are alike in type and work together to perform a specific function. [NIH]

Tone: 1. The normal degree of vigour and tension; in muscle, the resistance to passive elongation or stretch; tonus. 2. A particular quality of sound or of voice. 3. To make permanent, or to change, the colour of silver stain by chemical treatment, usually with a heavy metal. [EU]

Toxic: Having to do with poison or something harmful to the body. Toxic substances usually cause unwanted side effects. [NIH]

Toxicity: The quality of being poisonous, especially the degree of virulence of a toxic microbe or of a poison. [EU]

Toxicology: The science concerned with the detection, chemical composition, and pharmacologic action of toxic substances or poisons and the treatment and prevention of toxic manifestations. [NIH]

Trachea: The cartilaginous and membranous tube descending from the larynx and branching into the right and left main bronchi. [NIH]

Transaminase: Aminotransferase (= a subclass of enzymes of the transferase class that catalyse the transfer of an amino group from a donor (generally an amino acid) to an acceptor (generally 2-keto acid). Most of these enzymes are pyridoxal-phosphate-proteins. [EU]

Transfection: The uptake of naked or purified DNA into cells, usually eukaryotic. It is analogous to bacterial transformation. [NIH]

Transfusion: The infusion of components of blood or whole blood into the bloodstream. The blood may be donated from another person, or it may have been taken from the person earlier and stored until needed. [NIH]

Transmitter: A chemical substance which effects the passage of nerve impulses from one cell to the other at the synapse. [NIH]

Trigeminal: Cranial nerve V. It is sensory for the eyeball, the conjunctiva, the eyebrow, the skin of face and scalp, the teeth, the mucous membranes in the mouth and nose, and is motor to the muscles of mastication. [NIH]

Trigeminal Ganglion: The semilunar-shaped ganglion containing the cells of origin of most of the sensory fibers of the trigeminal nerve. It is situated within the dural cleft on the cerebral surface of the petrous portion of the temporal bone and gives off the ophthalmic, maxillary, and part of the mandibular nerves. [NIH]

Trigeminal Nerve: The 5th and largest cranial nerve. The trigeminal nerve is a mixed motor and sensory nerve. The larger sensory part forms the ophthalmic, mandibular, and maxillary nerves which carry afferents sensitive to external or internal stimuli from the skin, muscles, and joints of the face and mouth and from the teeth. Most of these fibers originate from cells of the trigeminal ganglion and project to the trigeminal nucleus of the brain stem. The smaller motor part arises from the brain stem trigeminal motor nucleus and innervates the muscles of mastication. [NIH]

Ulcer: A localized necrotic lesion of the skin or a mucous surface. [NIH]

Urinary: Having to do with urine or the organs of the body that produce and get rid of urine. [NIH]

Urine: Fluid containing water and waste products. Urine is made by the kidneys, stored in the bladder, and leaves the body through the urethra. [NIH]

Uterus: The small, hollow, pear-shaped organ in a woman's pelvis. This is the organ in which a fetus develops. Also called the womb. [NIH]

Vagal: Pertaining to the vagus nerve. [EU]

Vagus Nerve: The 10th cranial nerve. The vagus is a mixed nerve which contains somatic afferents (from skin in back of the ear and the external auditory meatus), visceral afferents (from the pharynx, larynx, thorax, and abdomen), parasympathetic efferents (to the thorax and abdomen), and efferents to striated muscle (of the larynx and pharynx). [NIH]

Vascular: Pertaining to blood vessels or indicative of a copious blood supply. [EU]

Vasodilators: Any nerve or agent which induces dilatation of the blood vessels. [NIH]

VE: The total volume of gas either inspired or expired in one minute. [NIH]

Vein: Vessel-carrying blood from various parts of the body to the heart. [NIH]

Venous: Of or pertaining to the veins. [EU]

Ventricle: One of the two pumping chambers of the heart. The right ventricle receives oxygen-poor blood from the right atrium and pumps it to the lungs through the pulmonary artery. The left ventricle receives oxygen-rich blood from the left atrium and pumps it to the body through the aorta. [NIH]

Ventricular: Pertaining to a ventricle. [EU]

Veterinary Medicine: The medical science concerned with the prevention, diagnosis, and treatment of diseases in animals. [NIH]

Virulence: The degree of pathogenicity within a group or species of microorganisms or viruses as indicated by case fatality rates and/or the ability of the organism to invade the tissues of the host. [NIH]

Wallerian Degeneration: Degeneration of distal aspects of a nerve axon following injury to the cell body or proximal portion of the axon. The process is characterized by fragmentation of the axon and its myelin sheath. [NIH]

Windpipe: A rigid tube, 10 cm long, extending from the cricoid cartilage to the upper border of the fifth thoracic vertebra. [NIH]

INDEX

Α

Acceptor, 49, 65 Acetylcholine, 49, 60 Acute renal, 49, 57 Adenoma, 18, 49 Adrenal Medulla, 49, 56, 60 Aerobic, 18, 49 Algorithms, 49, 51 Alternative medicine, 49 Anaemia, 22, 49 Anal, 49, 59 Anatomical, 49, 51, 53, 57 Anemia, 5, 49, 51, 64 Anesthetics, 49, 51, 56 Angina, 27, 49 Angina Pectoris, 27, 49 Angiography, 18, 50 Anthropometry, 8, 50 Antiarrhythmic, 15, 50 Antibodies, 50 Antibodies, Anticardiolipin, 50 Antibodies, Antiphospholipid, 50 Anticoagulant, 50 Antidepressant, 4, 50 Antiphospholipid Syndrome, 14, 50 Aorta, 11, 50, 66 Aphasia, 17, 50 Apoptosis, 21, 50 Arginine, 50, 60 Arterial, 21, 50, 57, 62, 64 Arteries, 50, 51, 52, 54, 60 Arteritis, 16, 17, 50 Artery, 7, 50, 51, 54, 55, 59, 66 Ascites, 51, 61 Asymptomatic, 28, 51 Atrial, 6, 7, 15, 19, 51 Atrial Fibrillation, 6, 7, 15, 19, 51 Atrium, 51, 59, 66 В Bacteria, 51, 55, 59 Bacterium, 51, 57 Barbiturate, 28, 51 Base, 51, 58, 64 Benign, 49, 51, 56 Beta-Thalassemia, 5, 51 Bile, 51, 58 Biological Transport, 51, 55 Biopsy, 51, 61

Biotechnology, 5, 33, 51 Bladder, 13, 51, 56, 57, 66 Blood Glucose, 4, 51, 57 Blood pressure, 51, 57 Blood vessel, 50, 51, 52, 53, 55, 57, 61, 64, 65,66 Bowel, 49, 52, 54, 64 Bowel Movement, 52, 54, 64 Bradykinin, 52, 60 С Cardiac, 5, 6, 9, 15, 27, 50, 51, 52, 55, 56, 60 Cardiac arrest, 27, 52 Cardiolipins, 50, 52 Cardioversion, 7, 52 Case report, 9, 10, 16, 52 Catalyse, 52, 65 Cause of Death, 5, 52 Cell, 5, 10, 16, 17, 22, 50, 51, 52, 53, 55, 56, 58, 59, 60, 61, 62, 64, 65, 66 Cell Death, 50, 52, 60 Central Nervous System, 49, 52, 56, 57, 58, 59 Cerebral, 4, 5, 6, 7, 9, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 23, 25, 27, 52, 54, 56, 57, 59, 64, 65 Cerebral Arteries, 52, 59 Cerebrospinal, 12, 52, 57 Cerebrospinal fluid, 12, 52, 57 Cerebrovascular, 3, 4, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 52 Cerebrum, 52 Cervical, 18, 21, 52 Cervix, 52, 56 Character, 49, 52 Chin, 53, 59 Chromatin, 50, 53 Chronic, 5, 15, 53, 62, 64 Clinical trial, 5, 33, 53 Cloning, 51, 53 Coagulation, 50, 53, 57 Complement, 53, 54 Complementary and alternative medicine, 21, 23, 53 Complementary medicine, 21, 53 Computational Biology, 33, 54 Conjunctiva, 54, 65 Connective Tissue, 50, 54, 58, 64 Connective Tissue Diseases, 50, 54

Consciousness, 54, 64 Continence, 19, 54 Contraindications, ii, 54 Contrast medium, 50, 54 Convulsions, 51, 54 Convulsive, 28, 54 Coronary, 10, 11, 50, 54, 60 Coronary Circulation, 50, 54 Coronary Thrombosis, 54, 60 Cortex, 18, 52, 54, 59 Cortical, 28, 54, 63 Cranial, 54, 58, 59, 65, 66 Cyclic, 54, 56, 60 Cyst, 54, 61 Cytoplasm, 50, 55 D Deletion, 50, 55 Dendrites, 55, 60 Dental Hygienists, 3, 4, 55 Diagnostic procedure, 55 Diastolic, 55, 57 Diffusion, 19, 51, 55 Digestion, 51, 52, 55, 58 Direct, iii, 4, 52, 55, 63, 64 Dissection, 21, 55 Distal, 55, 62, 66 Ε Edema, 55, 58, 61 Efficacy, 55, 58 Emboli, 7, 55 Embolization, 7, 55 Embolus, 16, 55, 58 Endocarditis, 10, 55 Endocardium, 55 Endothelium, 55, 60 Endothelium-derived, 55, 60 Environmental Health, 32, 34, 55 Enzymes, 56, 60, 65 Epidural, 17, 56 Epinephrine, 56, 60 Epithelial, 49, 51, 56 Erythrocyte Transfusion, 5, 56 Erythrocytes, 49, 56, 63 Extensor, 22, 56 Extravasation, 56, 57 Family Planning, 33, 56 Fat, 55, 56 Flexion, 18, 56 Flexor, 56 Fundus, 56

G

Ganglion, 56, 65 Gas, 55, 56, 60, 66 Gene, 51, 56 Gland, 49, 56, 58, 65 Governing Board, 56, 62 Guanylate Cyclase, 56, 60 н Hematoma, 17, 57 Hemoglobin, 49, 51, 56, 57, 64 Hemolytic, 9, 57, 64 Hemorrhage, 6, 28, 57, 64 Hemostasis, 27, 57 Hereditary, 5, 54, 57, 64 Hormone, 56, 57, 65 Hydrocephalus, 57, 58 Hyperglycemia, 28, 57 Hypertension, 13, 57, 58 Hypnotic, 51, 57 Hypoglycemia, 28, 57 Hypoglycemic, 4, 57 Hypoglycemic Agents, 4, 57 Hypotension, 28, 54, 57 Т Impairment, 4, 21, 57 Incontinence, 19, 57 Incontinentia Pigmenti, 7, 58 Infarction, 57, 58 Infertility, 58, 61 Inflammation, 50, 58, 62, 64 Infusion, 58, 65 Intermittent, 11, 58 Intracellular, 58, 60 Intracranial Hypertension, 12, 57, 58 Intravascular, 58, 61 Κ Kb, 32, 58 Keto, 58, 65 L Length of Stay, 15, 58 Lesion, 58, 66 Ligaments, 54, 58 Liver, 5, 51, 58 Localized, 57, 58, 61, 66 Long-Term Potentiation, 21, 58 Lumbar, 22, 58 Lupus, 14, 50, 58, 64 Lymph, 52, 55, 58 Lymph node, 52, 58 Lymphedema, 11, 58 Μ Mandibular Nerve, 59, 65

Mastication, 59, 65, 66 Maxillary, 59, 65 Medical Records, 59, 63 MEDLINE, 33, 59 Medullary, 10, 14, 59 Membranes, 51, 52, 59, 61, 65 Memory, 18, 58, 59 Mental, iv, 4, 5, 16, 32, 34, 53, 59, 62 Microbe, 59, 65 Middle Cerebral Artery, 21, 59 Mitosis, 50, 59 Mitral Valve, 6, 59 Modification, 59, 62 Molecular, 33, 35, 51, 54, 59 Morphine, 59, 60 Multiple Trauma, 16, 59 Multivariate Analysis, 8, 59 Myelin, 59, 66 Myelin Sheath, 59, 66 Myocardial infarction, 27, 54, 59, 60 Myocardial Ischemia, 49, 60 Myocardium, 49, 59, 60 Ν Narcosis, 60 Narcotic, 28, 59, 60 Necrosis, 50, 58, 59, 60 Nervous System, 52, 59, 60, 64 Neurologic, 3, 57, 60 Neurons, 4, 55, 60, 64 Neurotransmitter, 49, 52, 60 Nitric Oxide, 12, 60 Norepinephrine, 4, 60 Nucleus, 50, 53, 54, 55, 60, 65 Nursing Care, 9, 60 0 Occupational Therapy, 9, 11, 60 Ophthalmic, 16, 61, 65 Oral Health, 4, 61 Ovarian Hyperstimulation Syndrome, 6, 61 Overactive bladder, 13, 61 Overdose, 28, 61 Ovulation, 61 **Ovulation Induction**, 61 Paroxysmal, 10, 49, 61 Pathologic, 50, 51, 54, 61 Pathologic Processes, 50, 61 Pelvis, 58, 61, 66 Perception, 3, 61 Percutaneous, 9, 10, 61 Perfusion, 18, 61

Pharmacologic, 61, 65 Phospholipids, 50, 52, 56, 61 Placenta, 61, 62 Plants, 60, 61 Plasma, 50, 52, 57, 61 Platelet Aggregation, 60, 62 Platelets, 60, 62, 65 Pneumonia, 54, 62 Polymorphism, 12, 62 Polypeptide, 62, 64 Postoperative, 15, 17, 62 Postural, 28, 62 Practice Guidelines, 34, 62 Projection, 60, 62 Prophylaxis, 55, 62 Protein S, 51, 62 Proteins, 53, 56, 61, 62, 63, 65 Proximal, 55, 62, 66 Pseudotumor Cerebri, 58, 62 Psychic, 59, 62, 63 Public Policy, 33, 62 Puerperium, 16, 62 Pulmonary, 27, 51, 62, 66 Pulmonary Edema, 27, 62 Pyridoxal, 62, 65 Q Quality of Life, 4, 5, 62 R Radiation, 18, 49, 63 Radiography, 16, 50, 63 Radiological, 61, 63 Rectum, 52, 56, 57, 63 Red blood cells, 56, 57, 63 Refer, 1, 53, 61, 63 Retrospective, 6, 63 Retrospective study, 6, 63 Reversion, 52, 63 Risk factor, 10, 63 S Screening, 53, 63 Sedative, 28, 51, 63 Seizures, 61, 63 Self Care, 4, 63 Serum, 12, 53, 63 Shock, 28, 63 Signs and Symptoms, 4, 63 Social Environment, 63 Spasm, 54, 63 Spasticity, 22, 63 Specialist, 39, 63 Spinal cord, 52, 56, 60, 63 Steroids, 5, 64

Stool, 57, 64 Stroke, 3, 4, 12, 14, 15, 21, 27, 32, 38, 64 Stupor, 60, 64 Subacute, 18, 64 Sympathomimetic, 56, 60, 64 Symptomatic, 6, 28, 64 Synapses, 58, 64 Synaptic, 58, 60, 64 Syncope, 28, 64 Systemic, 50, 51, 56, 58, 64 Systemic lupus erythematosus, 50, 64 Systolic, 57, 64 Т Tachycardia, 6, 64 Temporal, 64, 65 Tendon, 56, 63, 64 Thalassemia, 15, 51, 64 Threshold, 57, 64 Thrombolytic, 17, 65 Thrombopenia, 50, 65 Thromboses, 50, 65 Thrombosis, 12, 62, 64, 65 Thyroid, 10, 65 Tissue, 6, 51, 53, 54, 55, 57, 58, 59, 60, 61, 64,65 Tone, 63, 65 Toxic, iv, 65 Toxicity, 28, 65 Toxicology, 34, 65

Trachea, 65 Transaminase, 12, 65 Transfection, 51, 65 Transfusion, 5, 65 Transmitter, 49, 60, 64, 65 Trigeminal, 9, 59, 65 Trigeminal Ganglion, 9, 65 Trigeminal Nerve, 65 U Ulcer, 9, 66 Urinary, 19, 57, 66 Urine, 51, 54, 57, 66 Uterus, 52, 56, 66 V Vagal, 12, 66 Vagus Nerve, 66 Vascular, 4, 5, 6, 7, 9, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 23, 25, 27, 55, 58, 60, 61, 66 Vasodilators, 60, 66 VE, 19, 66 Vein, 12, 66 Venous, 9, 50, 62, 66 Ventricle, 59, 64, 66 Ventricular, 6, 57, 66 Veterinary Medicine, 33, 66 Virulence, 65, 66 W Wallerian Degeneration, 19, 66 Windpipe, 65, 66

72 Cerebral Vascular Accident

