

1: Oxford Textbook of Clinical Nephrology

Oxford Textbook of Clinical Nephrology, 4th Edition PDF Book, By Neil Turner and David Goldsmith, ISBN: , Genres: Medical Free ebook download XooBooks is the biggest community for free ebook download, audio books, tutorials download, with format pdf, epub, mobi, and more.

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Description: This fourth edition of the Oxford Textbook of Clinical Nephrology builds on the success and international reputation of the publication as an important resource for the practising clinician in the field.

Assessment of the patient with renal disease 1. Epidemiology of kidney disease, Aminu K. Bello, Marcello Tonelli, and Kitty J. Clinical assessment of the patient with renal disease, Chris Winearls 3. Presentations of renal disease, Chris Winearls 4. Kidney disease focused history taking, Chris Winearls 5. Kidney disease focused features on examination, Chris Winearls 6. Assessment of renal function, Walter P. Tubular function, Walter P. Ionising radiation and radiation protection, Jeannette Kathrin and Peter Howells Plain radiography, excretion radiography, and contrast radiography, Akira Kawashima and Andrew J. Intervention, Steven Kennish Ultrasound, Toby Wells and Simon Freeman Computed tomography, Eugene Teoh and Michael Weston Radioisotopes in diagnostic imaging in nephrology, Ramya Dhandapani and Sobhan Vinjamuri Immunological investigation of the patient with renal disease, Jo H. Berden and Jack Wetzels The patient with fluid, electrolyte, and renal tubular disorders An overview of tubular function, Matthew A. Sodium transport and balance: A key role for the distal nephron, Laurent Schild Water homeostasis, David Marples and Soren Neilson Potassium homeostasis, Alain Doucet and Gilles Crambert Renal acid-base homeostasis, Carsten Wagner and Olivier Devuyst Calcium homeostasis, Francesco Trepiccione and Gianni Capasso Magnesium homeostasis, Pascal Houillier Approach to the patient with hyponatraemia, Ewout Hoorn and Bob Zietse Approach to the patient with hypernatraemia, Bob Zietse Approach to the patient with salt-wasting, Detlef Bockenhauer and Robert Kleta Approach to the patient with polyuria, Daniel Bichet Clinical use of diuretics, David Ellison and Arohan R. Approach to the patient with metabolic acidosis or alkalosis, Mitch Halperin and Kamel Kamel Approach to the patient with renal tubular acidosis, Stephen Walsh Approach to the patient with renal Fanconi syndrome, glycosuria or aminoaciduria, Detlef Bockenhauer and Robert Kleta Part 3: The patient with glomerular disease The glomerulus and the concept of glomerulonephritis, Alexander Woywodt and Diana Chiu The renal glomerulus - the structural basis of ultrafiltration, Marlies Elger and Wilhelm Kriz Mechanisms of glomerular injury: The patient with haematuria, John Neary and Neil Turner Loin pain haematuria syndrome, John Neary Nutcracker syndrome and phenomenon, John Neary and Neil Turner Exercise-related pseudonephritis, Neil Turner Proteinuria, Neil Turner and Stewart Cameron Postural proteinuria Benign orthostatic proteinuria , Neil Turner Pathophysiology of oedema in nephrotic syndrome, Neil Turner and Premil Rajakrishna Primary focal segmental glomerulosclerosis FSGS: Clinical features and diagnosis, Patrick Niaudet and Alain Meyrier Treatment and outcome, Patrick Niaudet and Alain Meyrier Secondary membranous glomerulonephritis, Daniel Cattran and Heather Reich Crescentic rapidly progressive glomerulonephritis, Neil Turner Anti-glomerular basement membrane disease: Antiglomerular basement membrane disease: Alport post-transplant antiglomerular basement membrane disease, Neil Turner Glomerulonephritis associated with endocarditis, deep-seated infections and shunt nephritis, Bernardo Rodriguez-Iturbe and Mark Haas Membranoproliferative glomerulonephritis and C3 glomerulopathy, T. Cook and Daniel Gale Fibrillary and immunotactoid glomerulopathy, Stephen Korbet, Melvin M. Schwartz, and Edmund J. The patient with interstitial disease Drug-induced acute tubulointerstitial nephritis, Hassan Izzedine and Victor Gueutin Other toxic acute tubulointerstitial nephritis, Gregory L. Braden and Benjamin J. Drug-induced chronic tubulointerstitial nephritis, Hassan Izzedine and Victor Gueutin Aristolochic acid nephropathy caused by ingestion of herbal medicinal products, Refik Gokmen and Graham Lord Balkan endemic nephropathy, Milan Radovic and Adalbert Schiller Radiation nephropathy, Lisa Phipps and David C. The patient with reduced renal function Chronic kidney disease in the developed world, Morgan Grams and Josef Coresh Chronic kidney disease long-term outcomes: Zalunardo and Adeera Levin Cardiovascular disease and chronic kidney disease: Recommendations for management of high renal risk chronic kidney disease, Charles Ferro and Khai Ping Ng Hypertension as a cause of chronic kidney disease: Lipid disorders of patients with chronic kidney disease, Alan Jardine and Rajan Patel Smoking in chronic kidney disease, Stephan R. Analytical aspects of

measurements and laboratory values in chronic and acute kidney disease, Edmund Lamb and Finlay MacKenzie Left ventricular hypertrophy in chronic kidney disease, Carmine Zoccali, Francesca Mallamaci, and Davide Bolignano Vascular stiffness in chronic disease - pathophysiology and implications, John Townend and Charles Ferro Oxidative stress and its implications in chronic disease, Nostratoli Vaziri Abnormal endothelial vasomotor and secretory function, Thimoteus Speer and Danilo Fliser Endothelins and their antagonists in chronic kidney disease, Neeraj Dhaun and David Webb Chronic kidney disease-mineral and bone disorder: Pathophysiology of chronic kidney disease - mineral and bone disorder, Alexandra Voinescu, Nadia Iqbal and Kevin Martin Fibroblast growth factor 23, klotho, and phosphorus metabolism in chronic kidney disease, Orlando Gutierrez Fractures in patients with chronic kidney disease, Alastair Hutchison and Michael L. Spectrum of bone pathologies in chronic kidney disease, Stuart Sprague and James Pullman Clinical aspects and overview of renal anaemia, Iain Macdougall Erythropoiesis-stimulating agents in chronic kidney disease, Iain Macdougall and Jolanta Malyszko Iron metabolism in chronic kidney disease, Jolanta Malyszko and Iain Macdougall Iron management in renal anaemia, Iain Macdougall Immunity, Behdad Afzali and Claudia Kemper The liver and chronic kidney disease, Fabrizio Fabrizi and Michel Jadoul Leslie, and Antonia J. The patient with reduced renal function: Sexual dysfunction, Tomas Agustsson and Paul Carroll Health related quality of life and the patient with chronic kidney disease, Fred Finkelstein and Susan Finkelstein Mechanisms of progression of chronic kidney disease- overview, Neil Turner Proteinuria as a direct cause of progression, Jeremy Hughes Nephron numbers and hyperfiltration as drivers of progression, Valerie Luyckx

3: The patient with systemic lupus erythematosus : Oxford Textbook of Clinical Nephrology - oi

With expert input from additional section editors William G. Bennett, Jeremy R. Chapman, Adrian Covic, Marc E. De Broe, Vivekanand Jha, Neil Sheerin, Robert Unwin, and Adrian Woolf, the Oxford Textbook of Clinical Nephrology is a three-volume international textbook of nephrology with an unrivalled clinical approach backed up by science.

Basic epidemiology principles in nephrology Introduction Epidemiology is the study of the distribution, determinants, and frequency of disease in populations or settings Rothman, , Epidemiological research helps to inform evidence-based medicine by identifying risk factors for disease and to determine optimal treatment approaches; it is the cornerstone of public health research and of preventive medicine. The identification of unbiased causal relationships between exposures risk factors or interventions such as hypertension or the use of antihypertensive medication and outcomes like morbidity and mortality is therefore an important aspect of epidemiology. This section will discuss some epidemiological concepts, methods, and their application to clinical research in nephrology. Research questions Defining an appropriate research question requires familiarity with knowledge gaps in the subject area to judge if a question is feasible, interesting, novel, ethical, and relevant FINER criteria Hulley et al. Whereas the FINER criteria highlight general aspects of research questions, the development of a specific research question may follow the PICO format, in which P stands for the population or problem of interest, I for the intervention or any other exposure , C for the comparison group, and O for the outcome of interest. Study design is an important aspect of study quality. Studies can be classified into experimental and observational ones depending on whether or not exposures like therapy were assigned by the investigators. Therefore, when it comes to studies on the effects of therapy or other interventions, randomized controlled trials RCTs are the gold standard. This was exemplified by RCTs showing a lack of effect or even harmful effects of using high target haemoglobin level in chronic kidney disease CKD patients as opposed to using a lower target Drueke et al. On the other hand, observational studies may answer questions on aetiology, diagnosis, prognosis, and adverse effects. In addition, they may provide answers on the effects of therapy where RCTs are not possible, inappropriate, inadequate, or unnecessary Black, The effect of transplantation as compared to dialysis cannot be determined through an RCT, as allocation of renal grafts depends on other factors like HLA-matching. Where there is no comparison control group as in case reports or case series , observational studies are called descriptive and where there is a comparison group they are referred to as analytical. Finally, the temporal direction of analytical observational studies determines the type of study. Cohort studies like the Dialysis Outcomes and Practice Patterns Study DOPPS determine the exposure of subjects to risk factors at the start of inclusion and then look forward in time to observe the occurrence of outcomes. They may provide a wealth of data which enable the investigator to study not only multiple outcomes butâ€”unlike RCTsâ€”also multiple exposures. In contrast, caseâ€”control studies compare cases those with the disease or other outcome of interest with controls those without the outcome of interest and then look back in time for exposures that might have caused the outcome. In nephrology, caseâ€”control studies are uncommon. Nevertheless, this study type is very efficient for studying potential risk factors for rare outcomes that may take a long time to develop, for example, CKD. By going back in time and looking for particular exposures like analgesics one may find associations between outcomes and these exposures. In such a case, prospective cohort studies are less efficient as one will need a very high number of subjects and a very long time to acquire an equal number of cases. Finally, cross-sectional studies examine the presence of an exposure and that of the outcome at the same moment in time. In most cases this simultaneity makes it difficult to determine which is the cause and which is the consequence, in other words, this design may induce a chicken-and-egg problem.

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This fourth edition of the Oxford Textbook of Clinical Nephrology builds on the success and international reputation of the publication as an important resource for the practising clinician in the field. It provides practical, scholarly, and

evidence-based coverage of the full spectrum of clinical nephrology, written by a global faculty of experts.

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This fourth edition of the Oxford Textbook of Clinical Nephrology builds on the success and international reputation of the publication as an important resource for the practising clinician in the field. It provides practical scholarly and evidence-based coverage of the full spectrum of clinical.

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