

https://www.ncbi.nlm.nih.gov/pubmed?holding=ikrsglib
(pubmed에서 세종병원이 구독하고 있는 저널이 모두 표기되는
세종병원 전용 페이지임을 명시함)

도서관 홈페이지를 통한
pubmed 접속

https://www.ncbi.nlm.nih.gov/pubmed?holding=ikrsglib



국내외 의학 문헌 검색



- 우리병원 Pubmed
- PubMed**
- ScienceDirect

Format: Abstract

Send to

Am J Cardiol. 2015 Mar 1;115(5):697-703. doi: 10.1016/j.amjcard.2014.12.002. Epub 2014 Dec 18.

Clinical and morphologic features of acute, subacute and chronic cor pulmonale (pulmonary heart disease).

Roberts WC¹, Shafiq AE², Grayburn PA³, Ko JM⁴, Weissenborn MR⁵, Rosenblatt RL⁶, Guileyardo JM⁷.

Author information

Abstract

Described are certain clinical and morphologic features of one patient with acute, another with subacute, and one with chronic cor pulmonale. All 3 had evidence of severe pulmonary hypertension. The patient with acute cor pulmonale 4 days after coronary bypass for unstable angina pectoris suddenly developed severe breathlessness with cyanosis and had fatal cardiac arrest and necropsy disclosed massive pulmonary embolism. The patient with subacute cor pulmonale had severe right-sided heart failure for 5 weeks and necropsy disclosed microscopic-

Full text links



Save items

Add to Favorites

Similar articles

Review [Right heart failure and cor pulmonale]. [Internist (Berl). 2007]

웹브라우저에서 바로
pubmed 접속

<https://www.ncbi.nlm.nih.gov/pubmed>
(세종병원 전용 pubmed 페이지와 URL이 다름)

https://www.ncbi.nlm.nih.gov/pubmed/

Home - PubMed - NCBI

편집(E) 보기(V) 즐겨찾기(A) 도구(T) 도움말(H)

Mediplus SJH Mediplus IRB SJH Library 온라인교육 IRB 업무 관련 도서실 업무 관련 Mine

NCBI Resources How To

Sign in to NCBI

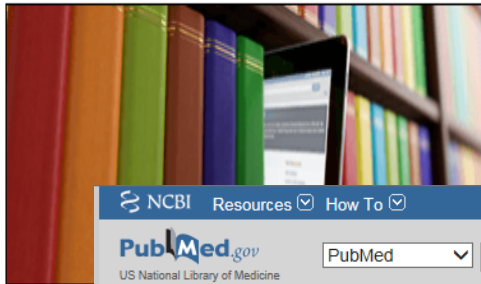
PubMed.gov
US National Library of Medicine
National Institutes of Health

PubMed

Search

Advanced

Help



PubMed

PubMed comprises more than 27 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.

NCBI Resources How To

Sign in to NCBI

PubMed.gov
US National Library of Medicine
National Institutes of Health

PubMed

Am J Cardiol. 2015 Mar 1;115(5):697-703

Search

Create RSS Create alert Advanced

세종병원 로고 없음

Using Pu

PubMed Qu

Full Text Ar

PubMed FA

PubMed Tut

New and No

Latest Lite

New articles

Format: Abstract

Send to

See 1 citation in Am J Cardiol 2015:

Am J Cardiol. 2015 Mar 1;115(5):697-703. doi: 10.1016/j.amjcard.2014.12.002. Epub 2014 Dec 18.

Clinical and morphologic features of acute, subacute and chronic cor pulmonale (pulmonary heart disease).

Roberts WC¹, Shafiq AE², Grayburn PA³, Ko JM⁴, Weissenborn MR⁵, Rosenblatt RL⁶, Guilevardo JM⁷.

Author information

Abstract

Described are certain clinical and morphologic features of one patient with acute, another with subacute, and one with chronic cor pulmonale. All 3 had evidence of severe pulmonary hypertension. The patient with acute cor pulmonale 4 days after coronary bypass for unstable angina pectoris suddenly developed severe breathlessness with cyanosis and had fatal cardiac arrest and necropsy disclosed massive pulmonary embolism. The patient with subacute cor pulmonale had severe right-sided heart failure for 5 weeks and necropsy disclosed microscopic-sized neoplastic pulmonary emboli from a gastric carcinoma without parenchymal pulmonary metastases. The patient with chronic cor pulmonale had evidence of right-sided heart failure for years, the result of primary or idiopathic pulmonary hypertension almost certainly present from birth because the pattern of elastic fibers in the pulmonary trunk was that seen in newborns where the pressure in the pulmonary trunk and ascending aorta are similar. The patient with chronic cor pulmonale had plexiform pulmonary lesions indicative of irreversible pulmonary hypertension. Neither the acute nor the subacute patient had chronic pulmonary vascular changes. All 3 patients had dilated right ventricular cavities and non-dilated left ventricular cavities and only the patient with chronic cor pulmonale had right ventricular hypertrophy.

Full text links

ELSEVIER
FULL-TEXT ARTICLE

Save items

Add to Favorites

Similar articles

Review [Right heart failure and cor pulmonale].
[Internist (Berl). 2007]

Review Chronic cor pulmonale.
[Dis Mon. 1989]

Review [Pulmonary diseases and heart
function].
[Internist (Berl). 2007]

[A clinicopathological study of cor pulmonale with
coronary heart di [Zhonghua Nei Ke Za Zhi. 1995]

Review The management of cor pulmonale.
[Heart Dis. 2000]

Format: Abstract

Send to

See 1 citation in Am J Cardiol 2015:

Am J Cardiol. 2015 Mar 1;115(5):697-703. doi: 10.1016/j.amjcard.2014.12.002. Epub 2014 Dec 18.

Clinical and morphologic features of acute, subacute and chronic cor pulmonale (pulmonary heart disease).

Roberts WC¹, Shafiq AE², Grayburn PA³, Ko JM⁴, Weissenborn MR⁵, Rosenblatt RL⁶, Guilevardo JM⁷.

Author information

Abstract
Described are certain clinical and morphologic features of one patient with acute, another with subacute, and one with chronic cor pulmonale. All 3 had evidence of severe pulmonary hypertension. The patient with acute cor pulmonale 4 days after coronary bypass for unstable angina pectoris suddenly developed severe breathlessness with cyanosis and had fatal cardiac arrest and necropsy disclosed massive pulmonary embolism. The patient with subacute cor pulmonale had severe right-sided heart failure for 5 weeks and necropsy disclosed microscopic-sized neoplastic pulmonary emboli from a gastric carcinoma without parenchymal pulmonary metastases. The patient with chronic cor pulmonale had evidence of right-sided heart failure for years, the result of primary or idiopathic pulmonary hypertension almost certainly present from birth because the pattern of elastic fibers in the pulmonary trunk was that seen in newborns where the pressure in the pulmonary trunk and ascending aorta are similar. The patient with chronic cor pulmonale had plexiform pulmonary lesions indicative of irreversible pulmonary hypertension. Neither the acute nor the subacute patient had chronic pulmonary vascular changes. All 3 patients had dilated right ventricular cavities and non-dilated left ventricular cavities and only the patient with chronic cor pulmonale had right ventricular hypertrophy.

Copyright © 2015 Elsevier Inc. All rights reserved.

PMID: 25727086 DOI: 10.1016/j.amjcard.2014.12.002

[Indexed for MEDLINE]



Publication types, MeSH terms

LinkOut - more resources

- Full Text Sources
- Elsevier Science
- ClinicalKey

- Medical
- Heart Disease - Genetic Alliance
- Pulmonary Disease - Genetic Alliance

본원에서 구독하고 있는 저널일 경우에는
LinkOut > Full Text Sources > ClinicalKey
를 클릭하면 원문 이용 가능!!!

Full text links



Save items

Add to Favorites

Similar articles

Review [Right heart failure and cor pulmonale]. [Internist (Berl). 2007]

Review Chronic cor pulmonale. [Dis Mon. 1989]

Review [Pulmonary diseases and heart function]. [Internist (Berl). 2007]

[A clinicopathological study of cor pulmonale with coronary heart di [Zhonghua Nei Ke Za Zhi. 1995]

Review The management of cor pulmonale. [Heart Dis. 2000]

See reviews...

See all...

Cited by 1 PubMed Central article

Anxiety in Patients with Chronic Cor Pulmonale and Its Effect on Exer [Iran J Public Health. 2016]

Related information

MedGen

Cited in PMC

Search details

"Am J Cardiol"[Journal] AND 2015[PDAT] AND 115[VOL] AND 5[ISS] AND 697-703[PAGE]