Sender's message: Búsqueda de endoscopia

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   [Early detection of esophageal neoplasms by magnifying endoscopy].
   [Article in Japanese]
   Arima M.

Source
Department of Gastroenterology, Saitama cancer center, Saitama, Japan.

PMID:
22007354 [PubMed - indexed for MEDLINE]

   [Colorectal cancer--current screening, treatment and follow-up standards].
   [Article in German]
   Trojan J.

Source
Medizinischen Klinik 1, Universität Frankfurt.

Abstract
Colorectal cancer is the second most prevalent cancer in Germany. Following the nationwide introduction of the screening colonoscopy at the age of 55 years, more patients are currently diagnosed at an earlier and therefore potential curable stage. The aim for the coming years will be to further accelerate the acceptance of colorectal cancer screening. Furthermore, the treatment of patients with colorectal cancer has become more effective due to interdisciplinary approaches as well as the introduction of new anti-cancer drugs. The current comprehensive treatment standards were communicated in
the form of a guideline in 2008. This article will summarise the most important standards for colorectal cancer screening as well as for treatment and follow-up as a guide for insurance purposes.

PMID: 21922715 [PubMed - indexed for MEDLINE]
Related citations


The significant rectal neoplasm and mucosectomy by transanal endoscopic microsurgery (Br J Surg 2011; 98: 1342-1344).
Barendse RM, Fockens P, Bemelman WA, de Graaf EJ, Dekker E.

Comment on


PMID: 21887781 [PubMed - indexed for MEDLINE]
Related citations


[Diagnostic and therapeutic management of Barrett's esophagus].
[Article in German]
Müller-Gerbes D, Aymaz S, Dormann A.

Source
Medizinische Klinik, Krankenhaus Holweide, Kliniken der Stadt Köln gGmbH.
muellergerbd@klinikenkoeln.de

PMID: 21882137 [PubMed - indexed for MEDLINE]
Related citations


[Acute abdomen in a patient with ANCA-associated vasculitis].
[Article in German]
Varbanova M, Schütte K, Kuester D, Bellutti M, Franke I, Steinbach J, Scheidbach H, Malfertheiner P.

Source

Abstract

HISTORY AND FINDINGS:
A 49-year-old man complained of increasing pain in the lower left abdomen. Three weeks previously joint pain had developed, and in the last 7 days the patient had noted a cutaneous rash at the lower legs. Within three days after admission a paralytic ileus developed, progressed and culminated in a small bowel perforation. In the 60 cm ileum specimen as well as in the skin lesions there was marked intra- und perivascular infiltration with neutrophil granulocytes and focal necrosis, but no granuloma.

DIAGNOSIS, TREATMENT AND COURSE:
As the proteinase 3 subtype of antineutrophil cytoplasmic antibodies (ANCA) was positive ANCA-associated vasculitis with gastrointestinal, cutaneous and kidney involvement was diagnosed. After initiation of cytostatic treatment with methylprednisolone boli und cyclophosphamide the patient's condition improved. The post-operative course was uneventful.

CONCLUSION:
ANCA-associated vasculitis rarely presents with severe gastrointestinal complications. The disease represents an interdisciplinary challenge because of its variable clinical presentation and the possibly lethal outcome if not adequately treated.

Georg Thieme Verlag KG Stuttgart · New York.

PMID: 21882133 [PubMed - indexed for MEDLINE]

Related citations
Thieme eJournals


[86-year-old patient with vomiting and loss of consciousness: the Mackler Triad].
[Article in German]
Nia AM, Abel J, Semmo N, Gassanov N, Er F.

Source
Klinik III für Innere Medizin, Klinikum der Universität zu Köln.

PMID: 21882132 [PubMed - indexed for MEDLINE]
Related citations
Thieme eJournals
BACKGROUND AND OBJECTIVE:
From May to June 2011 an outbreak of Shiga-toxin-producing Escherichia coli (EHEC) infections occurred in northern Germany leading to a great number of patients with hemolytic-uremic syndrome (HUS). A monocentric case series from Hamburg is described.

MATERIAL AND METHODS:
All patients at that time presenting with acute diarrhoea at the Asklepios Clinic Barmbek in Hamburg were proved for EHEC infections. Clinical data of EHEC and EHEC-HUS patients treated as in-patients as well as stool analysis and laboratory results were documented.

RESULTS:
In total, 117 patients suspicious to have EHEC infection were treated as in-patients. In 68 patients an EHEC infection (n = 36) or HUS (n = 32) could be confirmed. Additional infections with other diarrhoea-causative organism could be revealed in 23 of these 68 patients (34%). The median age of the HUS patients was 44 years being significantly lower compared to the age of EHEC patients without HUS (51 years, p = 0.04). In the group of HUS patients there were significantly more women (26/32 vs. 21/36, p = 0.03). 19 patients with HUS dialysis was necessary. In total, a number of 248 plasma separations were required. 18 patients developed severe neuro-psychiatric symptoms. One patient died.

CONCLUSION:
This monocentric case series describes one of the so far largest published series of mostly young and female patients with EHEC and EHEC-HUS.

Georg Thieme Verlag KG Stuttgart · New York.
21882131 [PubMed - indexed for MEDLINE]

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