

Acc Aha Hypertension Guidelines 2017

The objective of this guideline is to provide recommendations on the consumption of potassium to reduce noncommunicable diseases in adults and children. The recommendations given here can be used by those developing programmes and policies to assess current potassium intake levels relative to benchmark. If necessary, the recommendations can also be used to develop measures to increase potassium intake, through public health intervention such as food and product labelling, consumer education, and the establishment of food-based dietary guidelines.

This book gathers together contributions from internationally renowned authors in the field of cardiovascular systems and provides crucial insight into the importance of sex- and gender-concepts during the analysis of patient data. This innovative title is the first to offer the elements necessary to consider sex-related properties in both clinical and basic studies regarding the heart and circulation on multiscale levels (i.e. molecular, cellular, electrophysiologically, neuroendocrine, immunoregulatory, organ, allometric, and modeling). Observed differences at (ultra)cellular and organ level are quantified, with focus on clinical relevance and implications for diagnosis and patient management. Since the cardiovascular system is of vital importance for all tissues, *Sex-Specific Analysis of Cardiovascular Function* is an essential source of information for clinicians, biologists, and biomedical investigators. The wide spectrum of differences described in this book will also act as an eye-opener and serve as a handbook for students, teachers, scientists and practitioners.

This book provides a state-of-the-art description of the pathophysiology, diagnosis and management of valvular heart disease (VHD). With an aging population, the incidence and complexity of VHD has markedly increased and the introduction of transcatheter valve therapies have revolutionized the management of these frequent and serious cardiovascular diseases. The development of percutaneous valve interventions has revolutionized the management of VHD (or has dramatically changed its management) *Heart Valve Disease: State of the Art* is dedicated to provide up-to-date knowledge to clinical and interventional cardiologists, cardiovascular imagers and cardiac surgeons. It provides state-of-the-art information for the health-care professional working in heart valve clinics, heart teams, and centers of excellence that specialize in managing patients with heart valve disease.

This comprehensive volume provides a detailed review on the general work up of chronic kidney disease-associated resistant hypertension. This title is separated into four parts; the first of which provides definitions, epidemiology, characteristics, risk stratification and outcomes of resistant and apparent treatment resistant hypertension. The next two sections explore pathophysiology and diagnosis, treatment in the light of new guidelines, as well as procedures and devices for neural modulation. Part four discusses public health approaches to

resistant hypertension, educational programs, and resistant hypertension for general practitioners. Resistant Hypertension in CKD brings up-to-date information to nephrologists, internists, cardiologists and a wide array of other clinicians and health professionals taking care of chronic kidney disease patients. Introducing Cardiovascular Intervention, a comprehensive companion volume to Braunwald's Heart Disease. This medical reference book contains focused chapters on how to utilize cutting-edge interventional technologies, with an emphasis on the latest protocols and standards of care. Cardiovascular Intervention also includes late-breaking clinical trials, "Hot off the Press" commentary, and Focused Reviews that are relevant to interventional cardiology. View immersive videos from an online library of procedural clips located on Expert Consult. Remain abreast of the newest interventional techniques, including next-generation stents, invasive lesion assessment, and methods to tackle complex anatomy. Provide optimal patient care with help from easy-to-access information on the latest diagnostic and treatment advances, discussions on percutaneous approaches to structural heart disease, and new developments in treating heart valve disease.

The most popular annual guide of its kind—fully revised and updated to reflect all new clinical developments in every field of medicine For 60+ years, CURRENT Medical Diagnosis and Treatment—the flagship volume of the renowned Lange medical series—has been delivering the authoritative information students, residents, and clinicians need to build their medical knowledge, expertise, and confidence. Written by top experts in their fields, this unmatched guide is formatted in a way that enables you to find the answers you need quickly and easily. CURRENT Medical Diagnosis and Treatment 2022 focuses completely on solving practical bedside clinical issues without spending too much time on pathophysiology. It includes full review of all primary care topics, including gynecology, obstetrics, dermatology, ophthalmology, otolaryngology, psychiatry, neurology, toxicology, and urology. You'll find everything you need to know about inpatient and outpatient care, along with the most relevant diagnostic tools for day-to-day practice. Features: 320 images Hundreds of quick-access drug treatment tables, with indexed tradenames and updated drug prices Includes an annual review of advances in HIV treatment Includes Essentials of Diagnosis for most diseases/disorders Diagnostic/treatment algorithms present critical information in an at-a-glance format Up-to-date references provide peer-reviewed, evidence-based information "Electronic only" chapters available to all book customers, not just to CMDT online subscribers Expanded chapter content available online and in ebook for all chapter content

Diabetes and hypertension have evolved as two of the modern day epidemics affecting millions of people around the world. These two common co-morbidities lead to substantial increase in cardiovascular disease, the major cause of morbidity and mortality of adults around the world. In Diabetes and Hypertension: Evaluation and Management, a panel of renowned experts address a range of

critical topics -- from basic concepts in evaluation and management of diabetes and hypertension, such as dietary interventions, to evaluation and management of secondary hypertension in clinical practice. Other chapters focus on high cardiovascular risk populations such as those with coronary heart disease, chronic kidney disease and minority patients. In addition, evolving concepts and new developments in the field are presented in other chapters, such as prevention of type 2 diabetes and the epidemic of sleep apnea and its implication for diabetes and hypertension evaluation and management. An important title covering two of the most troubling disorders of our time, Diabetes and Hypertension: Evaluation and Management will provide the busy practitioner with cutting edge knowledge in the field as well as practical information that can translate into better care provided to the high-risk population of diabetics and hypertensive patients.

This book provides an overview of statin-associated muscle symptoms (SAMS) from clinical presentation to treatment and possible metabolic causes. It examines the risk factors, presentations, diagnosis and differential diagnosis, clinical management, and financial costs of SAMS. The book also highlights patients' perspectives on SAMS such as the psychosocial, emotional, and societal factors influencing their perceptions and experiences. Finally, the book presents the results of observational and clinical trials on the prevalence of SAMS, clinical trials for treatments, and potential future research approaches for improving the understanding and treatment of SAMS. A key addition to the Contemporary Cardiology series, Statin-Associated Muscle Symptoms is an essential resource for physicians, medical students, residents, fellows, and allied health professionals in cardiology, endocrinology, pharmacotherapy, primary care, and health promotion and disease prevention.

A practical approach to the investigation and treatment of adult congenital heart disease (ACHD), this fully updated Oxford Specialist Handbook is a concise and accessible overview of a complex condition. Packed with straightforward advice, management strategies and key clinical points, it equips clinicians with a sound understanding of the principles and physiology of ACHD. An ideal reference tool for cardiology trainees, general cardiologists and acute medicine physicians, this second edition of Adult Congenital Heart Disease has been fully reviewed to include new guidelines and increased illustrations to aid understanding. Brand new chapters on epidemiology, heart failure, device therapy and transition and transfer of care ensure that Adult Congenital Heart Disease remains the definitive guide to supporting clinicians throughout all aspects of the patient's care.

Ventricular arrhythmias cause most cases of sudden cardiac death, which is the leading cause of death in the US. This issue reviews the causes of arrhythmias and the promising new drugs and devices to treat arrhythmias.

The purpose of the "Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC 7)" is to provide an evidence-based approach to the prevention and management of hypertension. The key messages of this report are: in those older than age 50, systolic blood pressure (SBP) of greater than 140 mmHg is a more important cardiovascular disease (CVD) risk factor than diastolic BP (DBP); beginning at 115/75 mmHg, CVD risk doubles for each increment of 20/10 mmHg; those who are normotensive at 55 years of age will have a 90 percent lifetime risk of developing hypertension; prehypertensive individuals (SBP 120–139 mmHg or DBP 80–89 mmHg) require health promoting lifestyle modifications to prevent the progressive rise in blood pressure and CVD; for uncomplicated hypertension, thiazide diuretic should be used in drug treatment for most, either alone or combined with drugs from other classes; this report delineates specific high-risk

conditions, which are compelling indications for the use of other antihypertensive drug classes (angiotensin-converting enzyme inhibitors, angiotensin-receptor blockers, beta blockers, calcium channel blockers); two or more antihypertensive medications will be required to achieve goal BP (less than 140/90 mmHg, or less than 130/80 mmHg for patients with diabetes and chronic kidney disease); for patients whose BP is greater than 20 mmHg above the SBP goal or 10 mmHg above the DBP goal, initiation of therapy using two agents, one of which usually will be a thiazide diuretic, should be considered; regardless of therapy or care, hypertension will only be controlled if patients are motivated to stay on their treatment plan. Positive experiences, trust in the clinician, and empathy improve patient motivation and satisfaction. This report serves as a guide, and the committee continues to recognize that the responsible physician's judgment remains paramount.

This book is an up-to-date summary of all aspects of aortic disease, written by international experts in their fields, covering diagnostic concepts of all aortic diseases, the most modern therapeutic approaches in various aortic syndromes, the pathogenic origin and the most recent molecular and cellular findings that have revolutionized our present knowledge of aortic diseases. The reader will come to understand the aorta as a functional organ with a complex regulatory system rather than just a major arterial vessel, and will have a better understanding of the prognostic impact of various aortic syndromes, and of the most recent therapeutic concepts for chronic as well as acute aortic pathology. As a unique feature of this book, the aorta is placed in the center of systemic illnesses, such as atherosclerosis, diabetes, hypertension, infectious diseases and connective tissue disorders, storage diseases, trauma and toxic factors; this concept aims to attract the attention of both clinical specialties such as cardiology, radiology and cardiovascular surgery and adjacent areas like pathology and clinical genetics. The book portrays the aorta as an integral part of the cardiovascular system and the entire organism and features the complexity and clinical impact of all major aortic diseases. A comprehensive review of all aspects of hypertension in the elderly using the most current clinical data. Topics range from basic concepts, epidemiology and trials, and evaluation and management, to pharmacologic treatment, special populations, and adherence, all presented with an emphasis on the optimal management of patients. The authors examine in detail the mechanisms of hypertension in the elderly, the lifestyle trials and outcomes trials that were conducted in older persons, as well as the problems of clinical evaluation, secondary hypertension, adherence, and target organ damage. Extensive discussions of pharmacologic therapy detail the role of all the major drug classes.

The flagship title of the certification suite from the American College of Sports Medicine, ACSM's Guidelines for Exercise Testing and Prescription is a handbook that delivers scientifically based standards on exercise testing and prescription to the certification candidate, the professional, and the student. The 9th edition focuses on evidence-based recommendations that reflect the latest research and clinical information. This manual is an essential resource for any health/fitness and clinical exercise professional, physician, nurse, physician assistant, physical and occupational therapist, dietician, and health care administrator. This manual give succinct summaries of recommended procedures for exercise testing and exercise prescription in healthy and diseased patients.

Presenting the latest diagnostic and therapeutic developments in a multifaceted field, this book addresses the problems involved in preventing sudden cardiac death (SCD), focusing on risk stratification techniques designed to direct the selection and application of appropriate treatment modalities. Material reflects recent discoveries concerning the epidemiology and SCD pathophysiology, offering guidelines for more rational treatment approaches, both pharmacologic and interventional. The text reviews the vast epidemiologic data from the Framingham Study, with special emphasis on identifying clinical risk factors and the relation of coronary heart disease to SCD. It also details the background for risk stratification based on

well-established exercise testing and ambulatory electrocardiography techniques, as well as newer methods of electrophysiologic testing and signal average electrocardiography. Current prevention strategies--lifestyle alteration, prospective drug trials, surgical and implantable devices--are also discussed.

The third edition of *Hypertension: A Companion to Braunwald's Heart Disease*, by Drs. George L. Bakris and Matthew Sorrentino, focuses on every aspect of managing and treating patients who suffer from hypertensive disorders. Designed for cardiologists, endocrinologists and nephrologists alike, this expansive, in-depth review boasts expert guidance from contributors worldwide, keeping you abreast of the latest developments from basic science to clinical trials and guidelines. Features expert guidance from worldwide contributors in cardiology, endocrinology, neurology and nephrology. Covers behavior management as an integral part of treatment plans for hypertensives and pre-hypertensives. Covers new developments in epidemiology, pathophysiology, immunology, clinical findings, laboratory testing, invasive and non-invasive testing, risk stratification, clinical decision-making, prognosis, and management. Includes chapters on hot topics such as hypertension as an immune disease; sleep disorders including sleep apnea, a major cause of hypertension; a novel chapter on environmental pollution and its contribution to endothelial dysfunction, and more! Equips you with the most recent guidelines from the major societies. Updates sourced from the main *Braunwald's Heart Disease* text. Highlights new combination drug therapies and the management of chronic complications of hypertension.

Several genetic, biochemical and radiologic discoveries have impacted the management of endocrine hypertension, while surgical procedures have revolutionized treatment of patients with endocrine hypertension. This text contains the proceedings of a 2001 workshop on the topic.

Prevention of Stroke sums up and critically analyzes our present knowledge and understanding of all major aspects of stroke prophylaxis, medical and surgical. The book is intended for not only neurologists and neurosurgeons directly involved with stroke patients, but also vascular surgeons, internists, family physicians, and health planners. Topics explored include the cellular basis of atherosclerosis; stroke risk factors; head and neck bruits in stroke prevention; the present status of anticoagulant prophylaxis; hypertension and stroke prevention; and prevention of cardioembolic stroke, as well as the efficacy of aspirin and of ticlopidine in stroke prevention. Surgical prophylaxis is examined through discussions of carotid endarterectomy, prevention of stroke from cerebral vascular malformations, prevention of aneurysmal subarachnoid hemorrhage, balloon transluminal angioplasty of the carotid artery in the head and neck, and prevention of recurrent stroke.

Advances in medical, biomedical and health services research have reduced the level of uncertainty in clinical practice. Clinical practice guidelines (CPGs) complement this progress by establishing standards of care backed by strong scientific evidence. CPGs are statements that include recommendations intended to optimize patient care. These statements are informed by a systematic review of evidence and an assessment of the benefits and costs of alternative care options. *Clinical Practice Guidelines We Can Trust* examines the current state of clinical practice guidelines and how they can be improved to enhance healthcare quality and patient outcomes. Clinical practice guidelines now are ubiquitous in our healthcare system. The Guidelines International Network (GIN) database currently lists more than 3,700 guidelines from 39 countries. Developing guidelines presents a number of challenges including lack of transparent methodological practices, difficulty reconciling conflicting guidelines, and conflicts of interest. *Clinical Practice Guidelines We Can Trust* explores questions surrounding the quality of CPG development processes and the establishment of standards. It proposes eight standards for developing trustworthy clinical practice guidelines emphasizing transparency; management of conflict of interest ; systematic review--guideline development intersection;

establishing evidence foundations for and rating strength of guideline recommendations; articulation of recommendations; external review; and updating. Clinical Practice Guidelines We Can Trust shows how clinical practice guidelines can enhance clinician and patient decision-making by translating complex scientific research findings into recommendations for clinical practice that are relevant to the individual patient encounter, instead of implementing a one size fits all approach to patient care. This book contains information directly related to the work of the Agency for Healthcare Research and Quality (AHRQ), as well as various Congressional staff and policymakers. It is a vital resource for medical specialty societies, disease advocacy groups, health professionals, private and international organizations that develop or use clinical practice guidelines, consumers, clinicians, and payers.

The fourth report from the Nat. High Blood Pressure Educ. Program (NHBPEP) Working Group on Children & Adolescents. This report updates clinicians on the latest recommendations concerning the diagnosis, evaluation, & treatment of hypertension in children; recommendations are based on English-language, peer-reviewed, scientific evidence (from 1997 to 2004) & the consensus expert opinion of the NHBPEP Working Group. This report includes new data from the 1999-2000 Nat. Health & Nutrition Exam. Survey, as well as revised blood pressure tables that include the 50th, 90th, 95th, & 99th percentiles by sex, age, & height. Charts & tables.

Hypertension remains a leading cause of disability and death worldwide. Self-monitoring of blood pressure by patients at home is currently recommended as a valuable tool for the diagnosis and management of hypertension. Unfortunately, in clinical practice, home blood pressure monitoring is often inadequately implemented, mostly due to the use of inaccurate devices and inappropriate methodologies. Thus, the potential of the method to improve the management of hypertension and cardiovascular disease prevention has not yet been exhausted. This volume presents the available evidence on home blood pressure monitoring, discusses its strengths and limitations, and presents strategies for its optimal implementation in clinical practice. Written by distinguished international experts, it offers a complete source of information and guide for practitioners and researchers dealing with the management of hypertension.

Data suggest that exposure to secondhand smoke can result in heart disease in nonsmoking adults. Recently, progress has been made in reducing involuntary exposure to secondhand smoke through legislation banning smoking in workplaces, restaurants, and other public places. The effect of legislation to ban smoking and its effects on the cardiovascular health of nonsmoking adults, however, remains a question. Secondhand Smoke Exposure and Cardiovascular Effects reviews available scientific literature to assess the relationship between secondhand smoke exposure and acute coronary events. The authors, experts in secondhand smoke exposure and toxicology, clinical cardiology, epidemiology, and statistics, find that there is about a 25 to 30 percent increase in the risk of coronary heart disease from exposure to secondhand smoke. Their findings agree with the 2006 Surgeon General's Report conclusion that there are increased risks of coronary heart disease morbidity and mortality among men and women exposed to secondhand smoke. However, the authors note that the evidence for determining the magnitude of the relationship between chronic secondhand smoke exposure and coronary heart disease is not very strong. Public health professionals will rely upon Secondhand Smoke Exposure and Cardiovascular Effects for its survey of critical epidemiological studies on the

effects of smoking bans and evidence of links between secondhand smoke exposure and cardiovascular events, as well as its findings and recommendations.

This timely, concise title provides an important update on clinical lipid management. Using information from recent clinical trials and in special populations, the book begins by offering an easy-to-read overview of LDL, HDL, and triglyceride metabolism and the genetics of lipid disorders. The link between inflammation and lipids, and how this relates to atherosclerosis development, is also addressed, as are the measures of subclinical atherosclerosis in patients with abnormal lipid levels. Lipid abnormalities in children, with a particular focus on vulnerable populations (with an emphasis on ethnicity and childhood obesity), are covered. The treatment goals and approaches for managing lipids in the clinic are thoroughly discussed, emphasizing the important role of statin use and addressing controversies of lipid management in special populations such as heart failure, end stage kidney disease and fatty liver disease. Of special note, an important update on how new HIV medications impact lipid levels is provided. In all, *Lipid Management: From Basics to Clinic*, is an invaluable, handy resource for understanding changes in lipids in different populations and for sharpening the clinical approach to managing complicated lipid cases.

Dyslipidemia is a major risk factor for cardiovascular events, cardiovascular mortality, and all-cause mortality. The earlier in life dyslipidemia is treated, the better the prognosis. The current book is an excellent one on dyslipidemia written by experts on this topic. This book includes 12 chapters including 5 on lipids, 4 on hypercholesterolemia in children, and 3 on the treatment of dyslipidemia. This book should be read by all health care professionals taking care of patients, including pediatricians since atherosclerotic cardiovascular disease begins in childhood.

This book by the National Institutes of Health (Publication 06-4082) and the National Heart, Lung, and Blood Institute provides information and effective ways to work with your diet because what you choose to eat affects your chances of developing high blood pressure, or hypertension (the medical term). Recent studies show that blood pressure can be lowered by following the Dietary Approaches to Stop Hypertension (DASH) eating plan-and by eating less salt, also called sodium. While each step alone lowers blood pressure, the combination of the eating plan and a reduced sodium intake gives the biggest benefit and may help prevent the development of high blood pressure. This book, based on the DASH research findings, tells how to follow the DASH eating plan and reduce the amount of sodium you consume. It offers tips on how to start and stay on the eating plan, as well as a week of menus and some recipes. The menus and recipes are given for two levels of daily sodium consumption-2,300 and 1,500 milligrams per day. Twenty-three hundred milligrams is the highest level considered acceptable by the National High Blood Pressure Education Program. It is also the highest amount recommended for healthy Americans by

the 2005 "U.S. Dietary Guidelines for Americans." The 1,500 milligram level can lower blood pressure further and more recently is the amount recommended by the Institute of Medicine as an adequate intake level and one that most people should try to achieve. The lower your salt intake is, the lower your blood pressure. Studies have found that the DASH menus containing 2,300 milligrams of sodium can lower blood pressure and that an even lower level of sodium, 1,500 milligrams, can further reduce blood pressure. All the menus are lower in sodium than what adults in the United States currently eat-about 4,200 milligrams per day in men and 3,300 milligrams per day in women. Those with high blood pressure and prehypertension may benefit especially from following the DASH eating plan and reducing their sodium intake.

In August, 1985, the 2nd International Conference on Illness Behaviour was held in Toronto, Ontario, Canada. The first International Conference took place one year previous in Adelaide, South Australia, Australia. This book is based on the proceedings of the second conference. The purpose behind this conference was to facilitate the development of a single integrated model to account for illness experience and presentation. A major focus of the conference was to outline methodological issues related to current behaviour research. A multidisciplinary approach was emphasized because of the bias that collaborative efforts are likely to be the most successful in achieving greater understanding of illness behaviour. Significant advances in our knowledge are occurring in all areas of the biological and social sciences, albeit more slowly in the latter areas. Marked specialization in each of these areas has led to greater difficulty in integrating new knowledge with that of other areas and the development of a meaningful cohesive model to which all can relate. Thus there is a major need for forums such as that provided by this conference.

This new third edition of The ESC Textbook of Cardiovascular Medicine is a ground breaking initiative from the European Society of Cardiology that is transforming reference publishing in cardiovascular medicine in order to better serve the changing needs of the global cardiology community. Providing the evidence-base behind clinical practice guidelines, with in-depth peer-reviewed articles and broad coverage of this fast-moving field, both the print and digital publication are invaluable resources for cardiologists across the world. Overseen by Professors A. John Camm, Thomas F. Lüscher, Patrick W. Serruys, and Gerald Maurer, supported by an editorial board of subject experts, and more than 900 of the world's leading specialists from research and the clinic contributing, this dynamic encyclopaedic resource covers more than 63 disciplines within cardiology. Split into six key parts; Introduction to the cardiovascular system; Investigations; Heart diseases; Vascular disease; Special populations, and Other aspects of cardiology, providing readers with a trustworthy insight into all aspects of cardiovascular medicine. To respond nimbly to the rapid evolution of the field the digital publication, ESC CardioMed, is continuously updated by the author teams. With expert editors and authors, and stringent peer-review, the publication

combines the discoverability of digital with the highest standards of academic publishing. Highly illustrated with embedded multi-media features, along with cross-referenced links to ESC Clinical Practice Guidelines, related content and primary research data in European Heart Journal, as well as all other major journals in the field, ESC CardioMed provides users with the most dynamic and forward thinking digital resource at the heart of cardiology. As a consistently evolving knowledge base, the ESC Textbook of Cardiovascular Medicine 3e together with the online counterpart ESC CardioMed, equips all those, from trainees and consultants, to device specialists and allied healthcare professionals with a powerful, multifaceted resource covering all aspects of cardiovascular medicine.

This book is an up-to-date and comprehensive reference on lipidology. It will serve as a stimulus to the reader to continue to learn about the ever changing and fascinating field of therapeutic lipidology. It will also empower readers to improve and extend the lives of the patients they so conscientiously serve. Healthcare decision makers in search of reliable information that compares health interventions increasingly turn to systematic reviews for the best summary of the evidence. Systematic reviews identify, select, assess, and synthesize the findings of similar but separate studies, and can help clarify what is known and not known about the potential benefits and harms of drugs, devices, and other healthcare services. Systematic reviews can be helpful for clinicians who want to integrate research findings into their daily practices, for patients to make well-informed choices about their own care, for professional medical societies and other organizations that develop clinical practice guidelines. Too often systematic reviews are of uncertain or poor quality. There are no universally accepted standards for developing systematic reviews leading to variability in how conflicts of interest and biases are handled, how evidence is appraised, and the overall scientific rigor of the process. In Finding What Works in Health Care the Institute of Medicine (IOM) recommends 21 standards for developing high-quality systematic reviews of comparative effectiveness research. The standards address the entire systematic review process from the initial steps of formulating the topic and building the review team to producing a detailed final report that synthesizes what the evidence shows and where knowledge gaps remain. Finding What Works in Health Care also proposes a framework for improving the quality of the science underpinning systematic reviews. This book will serve as a vital resource for both sponsors and producers of systematic reviews of comparative effectiveness research. On the occasion of the symposium on Hypertension in Postmenopausal Women (Monte Carlo, January 19-22, 1994), international scientists and clinicians discussed the various aspects of high blood pressure in older women. This volume presents an overview of this important aspect of both cardiology and gynecology. Special emphasis is given to the different approaches to antihypertension treatment.

The association of diabetes mellitus and hypertension has been well known for a long time. However, the important impact of hypertension on the development of chronic complications of diabetes and on the prognosis of the diabetic patient has only recently been realized. The increasing number of patients with endstage diabetic nephropathy who need regular dialysis or renal transplantation reflects only one important aspect of

this problem. As new targets for the treatment of hypertension were considered, it became evident, that drug treatment of hypertension in diabetics must take side effects into account which may be negligible in the nondiabetic patient. Basic research has granted much new insight into the mechanisms which function to link diabetes, kidney function, hypertension, and vascular disease. As a result of the high specialisation in research, such new information diffuses only slowly out of the circles of experts into clinical practice. Therefore, it was a most rewarding initiative of the Bayer Company to sponsor a conference which aimed at a mutual exchange of ideas between clinicians and researchers who are experts in either hypertension or diabetes.

The field of HCV therapeutics continues to evolve rapidly and, since the World Health Organization (WHO) issued its first Guidelines for the screening, care and treatment of persons with hepatitis C infection in 2014, several new medicines have been approved by at least one stringent regulatory authority. These medicines, called direct-acting antivirals (DAAs), are transforming the treatment of HCV, enabling regimens that can be administered orally, are of shorter duration (as short as eight weeks), result in cure rates higher than 90%, and are associated with fewer serious adverse events than the previous interfere on containing regimens. WHO is updating its hepatitis C treatment guidelines to provide recommendations for the use of these new medicines. The objectives of these WHO guidelines are to provide updated evidence-based recommendations for the treatment of persons with hepatitis C infection using, where possible, all DAA-only combinations. The guidelines also provide recommendations on the preferred regimens based on a patient's HCV genotype and clinical history, and assess the appropriateness of continued use of certain medicines. This document also includes existing recommendations on screening for HCV infection and care of persons infected with HCV that were first issued in 2014. The key audience for these guidelines are policy-makers in low- and middle-income countries who formulate country-specific treatment guidelines and who plan infectious disease treatment programs and services, in addition to those people responsible for delivering treatment. The guidelines are appropriate for all countries, including high-income countries.

This third edition of Anthony Culyers authoritative The Dictionary of Health Economics brings the material right up to date as well as adding plentiful amounts of new information, with a number of revised definitions. There are now nearly 3,000 entries

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