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Autore	Cordaro Paulo
Titolo	Hyperfunctions on Hypo-Analytic Manifolds (AM-136), Volume 136 / / Paulo Cordaro, François Treves
Pubbl/distr/stampa	Princeton, NJ : , : Princeton University Press, , [2016] ©1995
ISBN	1-4008-8256-7
Descrizione fisica	1 online resource (398 pages)
Collana	Annals of Mathematics Studies ; ; 318
Disciplina	515/.782
Soggetti	Hyperfunctions Submanifolds
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Note generali	Bibliographic Level Mode of Issuance: Monograph
Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	Frontmatter -- CONTENTS -- PREFACE -- 0.1 BACKGROUND ON SHEAVES OF VECTOR SPACES OVER A MANIFOLD -- 0.2 BACKGROUND ON SHEAF COHOMOLOGY -- CHAPTER I. HYPERFUNCTION S IN A MAXIMAL HYPO-ANALYTIC STRUCTURE -- CHAPTER II. MICROLOCAL THEORY OF HYPERFUNCTIONS ON A MAXIMALLY REAL SUBMANIFOLD OF COMPLEX SPACE -- CHAPTER III. HYPERFUNCTION SOLUTIONS IN A HYPO-ANALYTIC MANIFOLD -- CHAPTER IV. TRANSVERSAL SMOOTHNESS OF HYPERFUNCTION SOLUTIONS -- HISTORICAL NOTES -- BIBLIOGRAPHICAL REFERENCES -- INDEX OF TERMS
Sommario/riassunto	In the first two chapters of this book, the reader will find a complete and systematic exposition of the theory of hyperfunctions on totally real submanifolds of multidimensional complex space, in particular of hyperfunction theory in real space. The book provides precise definitions of the hypo-analytic wave-front set and of the Fourier-Bros-Iagolnitzer transform of a hyperfunction. These are used to prove a very general version of the famed Theorem of the Edge of the Wedge. The last two chapters define the hyperfunction solutions on a general (smooth) hypo-analytic manifold, of which particular examples are the real analytic manifolds and the embedded CR manifolds. The main results here are the invariance of the spaces of hyperfunction solutions and the transversal smoothness of every hyperfunction solution. From

	this follows the uniqueness of solutions in the Cauchy problem with initial data on a maximally real submanifold, and the fact that the support of any solution is the union of orbits of the structure.

2. Record Nr. UNINA9910557353203321

Autore	Somani Bhaskar K
Titolo	Minimally Invasive Urological Procedures and Related Technological Developments
Pubbl/distr/stampa	Basel, Switzerland, : MDPI - Multidisciplinary Digital Publishing Institute, 2021
Descrizione fisica	1 online resource (142 p.)
Soggetti	Medicine and Nursing Surgery
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Sommario/riassunto	The landscape of minimally invasive urological intervention is changing. A lot of new innovations and technological developments have happened over the last 3 decades. Laparoscopy and robotic surgery have revolutionised kidney and prostate cancer treatment, with more minimally invasive procedures now being carried out than ever before. At the same time, technological advancements and the use of laser have changed the face of endourology. Several new innovative treatments are now commonplace for benign prostate enlargement (BPE). Management of prostate cancer now involves procedures such as robotic prostatectomy, brachytherapy, radiotherapy, cryotherapy and HIFU. Robotic partial nephrectomy and cryotherapy have changed the face of renal cancer. En-bloc resection of bladder cancer is challenging the traditional management of non-muscle invasive bladder cancer and becoming commonplace, while robotic cystectomy is also gaining popularity for muscle invasive bladder cancer. Newer surgical intervention related to BPE includes laser (holmium, thulium and green

light), water-based treatment (Rezum, Aquablation) and other minimally invasive procedures such as prostate artery embolisation (PAE) and Urolift. Endourological procedures have incorporated newer laser types and settings such as moses technology, disposable ureteroscopes (URS) and minimisation of percutaneous nephrolithotomy (PCNL) instruments. All these technological innovations and improvements have led to shorter hospital stay, reduced cost, potential reduction in complications and improvement in the quality of life (QoL).