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Nota di contenuto	PART I – INTRODUCTORY ASPECTS 1 Origin and evolution of the vasovagal reflex -- 2 Vasovagal syncope in the Divine Comedy and the Holy Bible -- 3 Definition and classification of transient loss of consciousness -- 4 Epidemiology of vasovagal syncope -- PART II – PATHOPHYSIOLOGY OF VASOVAGAL SYNCOPE 5 Role of autonomic nervous system -- 6 Role of baroreceptor mechanisms -- 7 Role of adenosine -- 8 Cardiac rhythms in neurally mediated syncope -- 9 Pathophysiology – Conclusive remarks -- PART III – DIAGNOSTIC AND CLINICAL ASPECTS -- 10 Initial evaluation of the patient with transient loss of consciousness -- 11 Clinical presentation and diagnosis of vasovagal syncope -- 12 Examinations in suspected vasovagal syncope PART IV – DIFFERENTIAL DIAGNOSIS -- 13 Differential diagnosis of vasovagal syncope -- 14 Differential diagnosis of peculiar syndromes: Postural tachycardia -- 15 Differential diagnosis of peculiar syndromes: Sick sinus syndrome -- 16 Differential diagnosis of peculiar syndromes: Chronic fatigue syndrome -- 17 Differential diagnosis of peculiar syndromes: Fibromyalgia -- PART V – PROGNOSIS AND TREATMENT 18

Prognosis of vasovagal syncope and risk stratification in the emergency department -- 19 Treatment of vasovagal syncope: Counseling, drugs and counter-pressure manoeuvres -- 20 Role of loop-recorder and pacemaker implantation -- 21 Therapy – Conclusive remarks -- PART VI – SPECIAL ISSUES -- 22 Vasovagal syncope in children -- 23 Vasovagal syncope in the elderly -- 24 Vasovagal syncope during driving, working and physical activity -- 25 Vasovagal syncope and orthostatic intolerance after space flight -- 26 Vasovagal syncope and sudden death: is there a liaison?.

Sommario/riassunto

This book is exceptional in being devoted solely to vasovagal syncope (VVS), the most frequent cause of transient loss of consciousness in the general population. All aspects of VVS are covered, including epidemiology, pathophysiology, diagnosis and differential diagnosis, prognosis, therapy and implications for particular activities such as work, driving and physical activity. The context for the book is that about half of the population suffer from this type of loss of consciousness during their lifetime and then often call for general practitioner and/or emergency room assistance. While many pathophysiological aspects of VVS have been clarified, others remain elusive. The diagnosis of VVS may be easy, but it is sometimes challenging. From the therapeutic standpoint, few evidence-based therapies have been established and the large majority of treatments remain unsatisfactory. *Vasovagal Syncope* presents the latest evidence on all these issues and will be of value for internists, cardiologists, neurologists, emergency physicians and general practitioners.
