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Nota di contenuto	Diagnostic Dilemma for Orthopaedic Surgeon -- Legal Aspects of Compartment Syndrome -- Pathophysiology of compartment syndrome -- Determining Ischemic Thresholds Through Our Understanding of Cellular Metabolism -- PRESSURE MEASUREMENT – A SURROGATE OF ISCHEMIA -- Limitations of Pressure Measurement -- Fasciotomy – Upper Extremity -- Compartment Syndrome of the Lower Extremity -- Fasciotomy Wound Management -- Foot Compartment Syndrome Controversy -- Management of Missed Compartment Syndrome -- Compartment Syndrome Due to Patient Positioning -- Acute Compartment Syndrome in Children -- Compartment Syndrome in Polytrauma Patients -- Unusual Presentation of Compartment Syndrome -- Common Misperceptions Among Health Care Professionals -- Novel Modalities to Diagnose and Prevent Compartment Syndrome.
Sommario/riassunto	Compartment syndrome is a complex physiologic process with significant potential harm, and though an important clinical problem, the basic science and research surrounding this entity remains poorly understood. This unique open access book fills the gap in the knowledge of compartment syndrome, re-evaluating the current state of the art on this condition. The current clinical diagnostic criteria are

presented, as well as the multiple dilemmas facing the surgeon. Pathophysiology, ischemic thresholds and pressure management techniques and limitations are discussed in detail. The main surgical management strategy, fasciotomy, is then described for both the upper and lower extremities, along with wound care. Compartment syndrome due to patient positioning, in children and polytrauma patients, and unusual presentations are likewise covered. Novel diagnosis and prevention strategies, as well as common misconceptions and legal ramifications stemming from compartment syndrome, round out the presentation. Unique and timely, *Compartment Syndrome: A Guide to Diagnosis and Management* will be indispensable for orthopedic and trauma surgeons confronted with this common yet challenging medical condition. .
