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| Autore | Allum, Percy A. |
| Titolo | Potere e società a Napoli nel dopoguerra / P. A. Allum |
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| Descrizione fisica | XVI, 550 p. ; 22 cm. |
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| Titolo | The Chiari malformations / / R. Shane Tubbs, W. Jerry Oakes, editors |
| Pubbl/distr/stampa | New York, : Springer, 2013 |
| ISBN | 1-4614-6369-6 |
| Edizione | [1st ed. 2013.] |
| Descrizione fisica | 1 online resource (377 p.) |
| Altri autori (Persone) | TubbsR. Shane<br>OakesW. Jerry |
| Disciplina | 616.8 |
| Soggetti | Arnold-Chiari deformity<br>Spinal cord - Abnormalities |
| Lingua di pubblicazione | Inglese |
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| Livello bibliografico | Monografia |
| Note generali | Description based upon print version of record. |
| Nota di bibliografia | Includes bibliographical references and index. |
| Nota di contenuto | Foreword; Contents; Contributors; 1: Introduction and Classification of the Chiari Malformations; References; 2: The Chiari Malformations: A Historical Context; Early Descriptions of Hindbrain Herniation; Surgical History of the Chiari Malformations; References; 3: Embryology of the Craniocervical Junction and Posterior Cranial Fossa; Sclerotogenesis and Development of the Vertebrae; Development of Vertebrae Below C2; The Development of the Craniocervical Junction; Development of the |

Occipital Condyle; Proatlas Segmentation Malformation and Variable Manifestations of the Proatlas
Ossification of the AtlasAtlantooccipital Assimilation and Other Developmental Anomalies of the Atlas; Basicranial Development; Contribution of Cells of Neural Crest Origin to the Basicranium; Development of the Occipital Bone; Basicranial Angle, Platybasia, and Basilar Kyphosis; Basilar Invagination and Basilar Impression; Shallowness of the Posterior Cranial Fossa in Chiari I Malformation; Underdevelopment of the Occipital Bone and Basioccipital Hypoplasia in Chiari I Malformation; Nonlinear Nature of Occipital Bone Dysplasia in the Chiari I Malformation
Midface Retrocession in Chiari MalformationEmbryogenesis of the Hindbrain; The Developmental Anatomy of the Cerebellum; Development of the Rhombic Roof; Abnormal Cerebellar Development and Morphology Associated with Neural Tube Defects and the Chiari II Malformation; Prenatal Period; Postnatal Period; Rhombencephalosynapsis; Agenesis or Occlusion of the Foramen of Magendie in Chiari I Malformation; The Development of the Tentorium Cerebelli; Posterior Cranial Fossa Volume and Its Determinants; Ventricular Distension; Rotation of the Intracranial Attachment of the Tentorium Cerebelli
Rotation of the Otic Cartilage and Petrous Temporal Bone and Shift in the Pattern of Posterior Cranial Fossa GrowthGrowth of the Basicranial Synchondroses; Upward Reflection of the Tentorium Cerebellum; Hormonal Influences; References; 4: Embryology and Pathophysiology of the Chiari I and II Malformations; Hydrocephalic Brain or Pressure Coning Theory; External Compression Theory; Posterior Cranial Fossa Overcrowding in Chiari Malformation; Hydrodynamic Theory; Occipital Dysplasia Theory; The Neural Tube Overgrowth or Disorganized Neural Tube Growth Theory; Neuroschisis Theory
Cord Traction or Tethered Cord TheoryDevelopmental Arrest Theory; Inadequate Ventricular Distension Theory; Craniocervical Growth Collision or Caudocranial (Reversed) Vertebral Growth Theory; Theory of "Suck and Slosh" Effect as the Cause of Origin and Expansion/Maintenance of a Spinal Cord Syrinx; Exaggerated Spinal CSF Systolic Wave Theory for Syringomyelia; References; 5: Surgical Anatomy of the Craniocervical Junction Relevant to Chiari Malformations; Soft Tissues of the Posterior Craniocervical Junction; Cervical Nerves; Upper Cervical Spine Vasculature; Posterior Cranial Fossa
Venous Sinuses

Sommario/riassunto

Once an uncommon clinical finding, the Chiari malformations are now frequently seen with the advent of more sophisticated imaging modalities. With more than one hundred years of experience with these entities, medicine currently has a much better understanding of the embryology and pathophysiology of the disorder. Long-term outcome studies are becoming more prevalent and patients are commonly operated on with generally favorable results. Comprehensive in design,  the The Chiari Malformations focuses on the two most common forms of hindbrain herniation, the Chiari I and II malformations.  Since the original description and classification of hindbrain hernias more than one hundred and twenty years ago, the Chiari malformations have revealed much of their pathophysiology and have become easily diagnosed radiologically.  Indeed with the availability of MRI, more and more patients are being labeled with the diagnosis but without symptoms or appropriate symptoms.  Timely and an invaluable addition to the literature, The Chiari Malformations thoroughly details the progress that has been made with our

understanding of these conditions, their radiologic definition, details of operative intervention and prediction of outcome.