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Receptor Agonists (Triptans)"; "Other Drugs"; "Herpes Zoster";
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"Introduction"; "Epidemiology"; "Categories of Esophageal Chest
Pain"; "GERD Related Chest Pain"; "Esophageal Dysmotility Related
Chest Pain"; "Esophageal Hypersensitivity"
"Eosinophilic Esophagitis"; "Infectious Esophagitis"; "Functional Chest
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"Other Tests"; "Management"; "Antireflux Therapy";
"Neuromodulators"; "Smooth Muscle Relaxants"; "Botulinum Toxin
Therapy"; "Other Approaches"; "Nonpharmacologic Approaches";
"Prognosis"; "References"; "Part II : Epidemiology and
Pathogenesis"; "4: Epidemiology of Cardiac Syndrome X and
Microvascular Angina"; "Epidemiological Considerations"
"Defining Normal Coronary Angiography"; "Historical Evolution of a
Syndrome X"; "Prevalence and Incidence Data"; "Chest Pain and
Normal Coronary Angiography"; "Chest Pain of Unknown Origin";
"Natural History of Chest Pain and Normal Coronary Angiography";
"Clinical Features"; "Chest Pain Characteristics"; "Cardiac Events";
"Functional Outcomes"; "Possible Causes of Chest Pain with Normal
Coronary Angiography"; "Cardiac Causes"; "Specific Coronary
Microvascular Disorders"; "Cardiac Syndrome X (Syndrome X);"
"Microvascular Angina"
"Coronary Slow Flow Phenomenon"

Sommario/riassunto

The condition known as “chest pain with normal coronary arteries” or “cardiac syndrome X” has puzzled physicians since the advent of coronary arteriography. Although epicardial coronary artery spasm, as seen in Prinzmetal’s variant angina, explains a proportion of cases of typical chest pain despite normal coronary arteriograms, many patients who seek medical attention for exertional and rest angina in the absence of obstructive coronary artery disease are not variant angina cases. This syndrome therefore constitutes both a diagnostic and therapeutic challenge. Chest Pain with Normal Coronary Arteries has been written by many of the most active international research groups and comprehensively tackles the clinical presentation and the pathogenesis of the condition, as well as its management. Abnormalities of the coronary microcirculation have remained elusive to conventional imaging and researchers appear only recently to be making progress in obtaining much needed information in this field. The functional aspects of the coronary microcirculation, its clinical presentation and prognosis, as well as the diagnostic tests used for the assessment of microvascular dysfunction are important topics highlighted in this book, which also includes useful clinical diagnostic algorithms, thus bringing this subject closer to the practicing cardiologist. This book thus represents a practical tool for the clinician and a bank of information and new ideas for research scientists and clinical researchers interested in understanding the causes and mechanisms of the condition.
