

1. Record Nr.	UNINA9911018947803321
Autore	Camm A. John
Titolo	Acquired long QT syndrome // A. John Camm, Yee Guan Yap, Marek Malik
Pubbl/distr/stampa	Malden, Mass., : Futura, c2004
ISBN	9786610196661 9781280196669 1280196661 9780470799420 0470799420 9780470994771 0470994770 9781405146166 1405146168
Descrizione fisica	1 online resource (208 p.)
Altri autori (Persone)	YapYee Guan MalikMarek
Disciplina	616.1/28
Soggetti	Long QT syndrome
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Note generali	Description based upon print version of record.
Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	Acquired Long QT Syndrome; Contents; Preface; 1 Introduction; 2 Mechanisms of acquired QT prolongation and torsades de pointes; 3 Measurement of QT interval and repolarization assessment; 4 Introduction to drug-induced long QT syndrome; 5 Risk of QT prolongation and torsades de pointes with antiarrhythmic drugs; 6 Risk of QT prolongation and torsades de pointes with antihistamines; 7 Risk of QT prolongation and torsades de pointes with psychotropic drugs; 8 Risk of QT prolongation and torsades de pointes with antimicrobial and antimalarial drugs 9 Risk of QT prolongation and torsades de pointes with prokinetics and miscellaneous other drugs10 Acquired long QT syndrome secondary to cardiac conditions; 11 Acquired long QT syndrome secondary to noncardiac conditions; 12 Perspective on drug-induced repolarization changes; Index

---

## Sommario/riassunto

In recent years there has been considerable interest in the diagnosis and understanding of ventricular repolarisation, particularly the QT interval prolongation and abnormal T and T/U wave morphology associated with torsades de pointes. Advances in ion channel cloning have greatly improved our understanding of the role of ionic channels in mediating cardiac repolarisation. Unfortunately, it is increasingly recognised that a number of drugs, both those associated with altering repolarisation, and others for non-cardiac conditions can increase the propensity for polymorphic ventricular tachycard

---