

1. Record Nr.	UNISA996218596003316
Titolo	Immune dysfunction and immunotherapy in heart disease [[electronic resource] /] / edited by Ronald Ross Watson & Douglas F. Larson
Pubbl/distr/stampa	Oxford, : Blackwell, 2007
ISBN	1-281-06941-8 9786611069414 0-470-69232-4 0-470-76651-4
Descrizione fisica	1 online resource (323 p.)
Classificazione	YB 9022
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Disciplina	616.1/207 616.1207
Soggetti	Heart - Diseases - Immunological aspects Heart - Diseases - Immunotherapy Immunologic diseases - Complications
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	Immune Dysfunction and Immunotherapy in Heart Disease; Contents; Contributors; Preface; About the Editors; Part I Immune dysfunction leading to heart disease: induction by physiological changes; 1 Immunosuppression by ultraviolet light-B radiation: a mediator of cardiac remodeling; 2 Immune mechanisms in pediatric cardiovascular disease; 3 Heart failure-role of autoimmunity; 4 Immune basis of hypertension in humans; 5 Immune dysregulation: potential mediator metabolic syndrome-induced cardiac remodeling; 6 T helper 2 cell cytokines in remodeling of aortic wall 7 Effects of TNF-a on cardiac function8 Immunosuppression in promotion of cardiac allograft vasculopathy; 9 Immunotherapy for left ventricular dysfunction after heart transplantation; Part II Immune dysfunction promoting CVD: induction by transplantation drugs; 10 Immunomodulating therapy in chronic heart failure; 11 Statins in atherosclerosis: role of immune regulation; 12 ACE inhibitors as immunomodulators: treatment of cardiovascular disease; 13 Treatment

of heart failure by anticytokine therapies

Part III Immune dysfunction leading to heart dysfunction: induction or prevention by cardiotherapeutic drugs¹⁴ Pathogenesis of cardiovascular complications in the acquired immunodeficiency syndrome; ¹⁵ Cytokines and T cell-mediated responses in autoimmune myocarditis; ¹⁶ Drugs of abuse: accentuation of immunomodulation of viral myocarditis; Part IV Immune dysfunction leading to heart disease: induction by pathogens; ¹⁷ Osteopontin: the link between the immune system and cardiac remodeling; ¹⁸ Inflammatory immune activation in heart failure patients: therapeutic implications
²⁶ Role of oral pathogens in the pathogenesis of coronary heart disease²⁷ Myocardial regenerative potential by stem cell transplant; ²⁸ Bioflavonoids and dietary anti-inflammatory actions: role in cardiovascular diseases; Index

Sommario/riassunto

Current heart failure therapeutics affects symptoms without appreciably reducing the mortality rate of 50% in five years -- suggesting a failure in treating the underlying mechanism. This book proposes a new mechanism for heart failure; immune mediated cardiac remodelling for cardiac dysfunction. The outstanding editor team of two internationally recognized immunologists -- Ronald Watson, who has studied heart disease in immune dysfunction for a decade and has a patent for an immunotherapy of heart disease by immune regulation, and Douglas Larson, whose experience in cardiac transplantat
