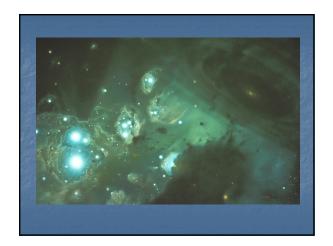


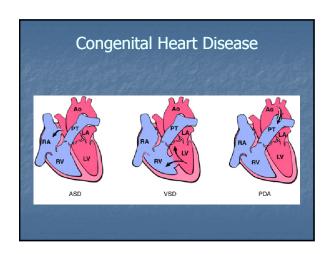
Pathology of the Heart

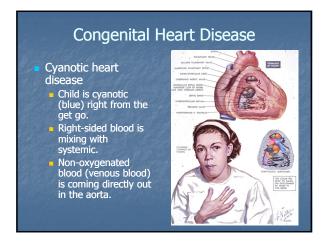
- All problems are eventually expressed as inadequate cardiac output.
 - Leaks in the system
 - Electrical Conduction, irregular rhythm
 - Obstruction to flow
 - Valve problems, obstruction or incompetence
 - Cardiac muscle weakness and failure

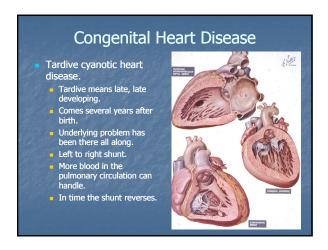


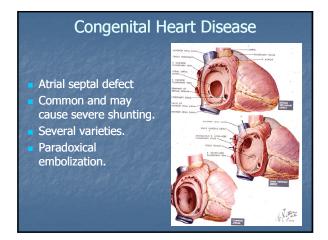
Congenital Heart Disease

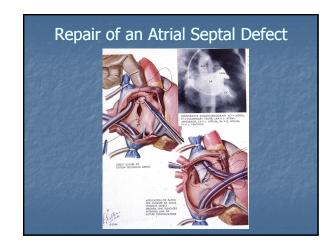
- Clinical symptoms come from mixing blood.
 - Right (unoxygenated) blood is shunted to...
 - Systemic output
 - Cyanosis, either immediate or late
- Present at birth
 - Genetic factors are rare
 - Environmental (developmental) are common
 - Maternal infections
 - Fetal alcohol syndrome

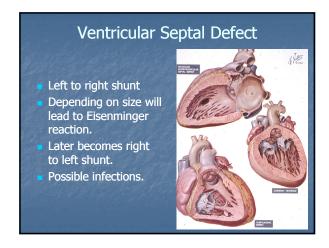


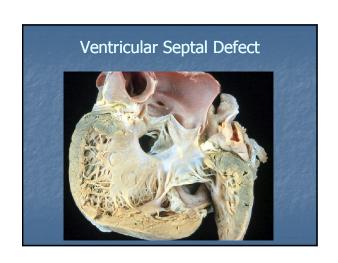


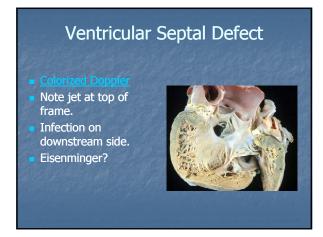


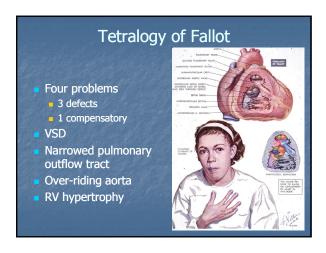


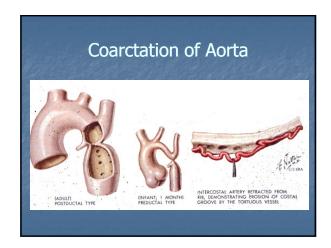






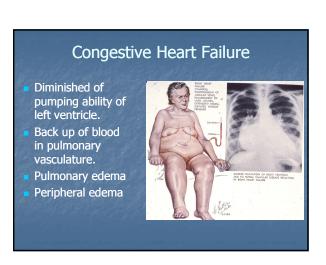


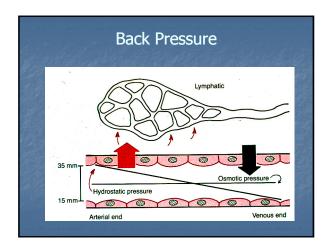


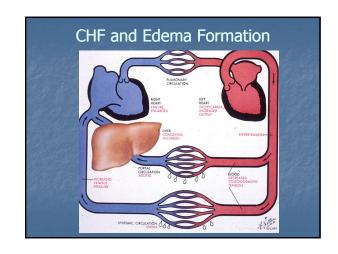


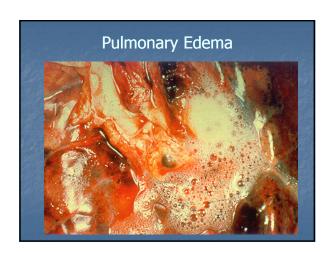


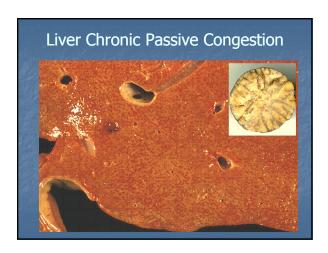
Heart Failure Diminished out volume of either ventricle. Systolic failure Loss of pumping strength. Backup of blood behind weakened ventricle. Atherosclerosis leading to chronic ischemia. Diastolic failure Reduced ability of ventricle to fill. Constriction of trapping of ventricle



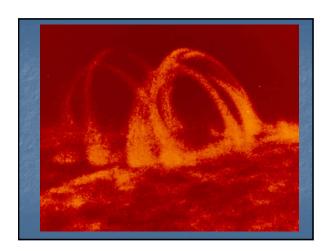






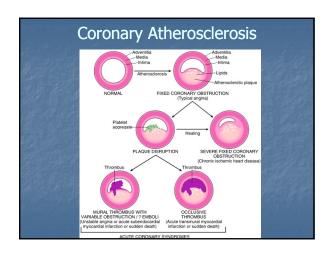




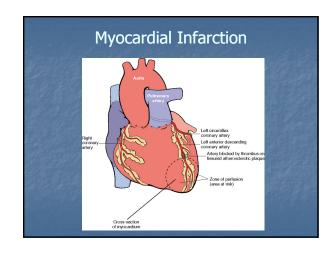


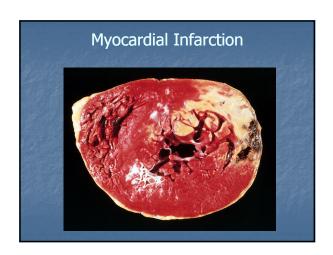
Ischemic Heart Disease

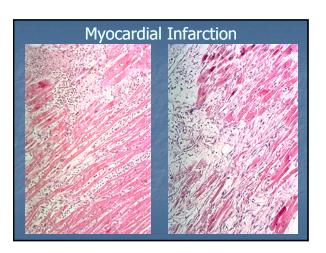
- This is the biggie in the western world.
- Atherosclerosis of coronary arteries.
- Acute vs. chronic ischemia.
- Four basic patterns
 - Angina pectoris
 - Myocardial infarction
 - Chronic ischemia leading to CHF
 - Sudden death from arrhythmia

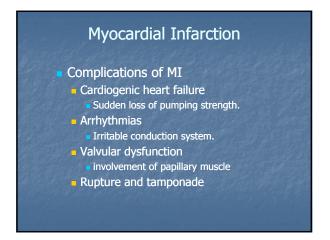


Coronary Atherosclerosis Fical narrowing Figure State Coronary Atherosclerosis Figure State C

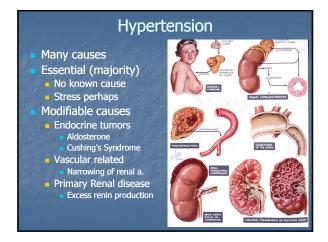


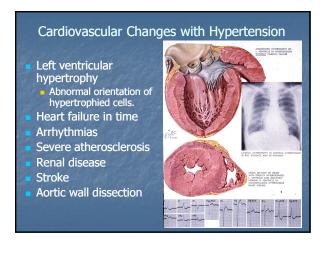


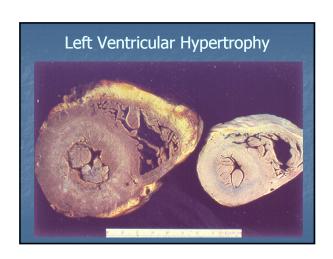


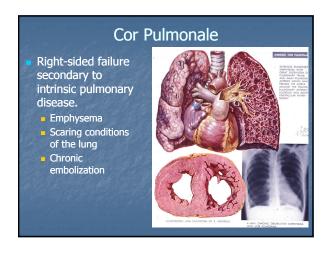


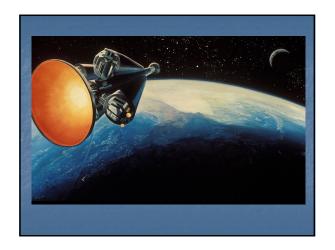


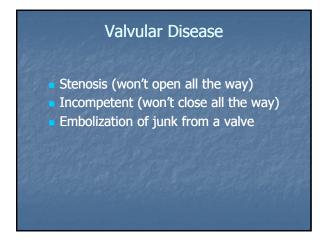












Rheumatic Fever Streptococcal infection starts it. Antibodies are made against Strep wall. Antibodies cross react with connective tissue. Type II hypersensitivity. Many systems become involved.

