

Stroke: Pathophysiology, Diagnosis, and Management (Stroke Pathophysiology Diagnosis and Management)

James C. Grotta, Gregory W Albers, Joseph P Broderick, Scott E Kasner, Eng H Lo, A David Mendelow, Ralph L Sacco, Lawrence KS Wong

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Offered in print, online, and downloadable formats, this updated edition of *Stroke: Pathophysiology, Diagnosis, and Management* delivers convenient access to the latest research findings and management approaches for cerebrovascular disease. Picking up from where J. P. Mohr and colleagues left off, a new team of editors - Drs. Grotta, Albers, Broderick, Kasner, Lo, Mendelow, Sacco, and Wong - head the sixth edition of this classic text, which is authored by the world's foremost stroke experts.

- Comprehensive, expert clinical guidance enables you to recognize the clinical manifestations of stroke, use the latest laboratory and imaging studies to arrive at a diagnosis, and generate an effective medical and surgical treatment plan.
- Abundant full-color CT images and pathology slides help you make efficient and accurate diagnoses.
- **Comprehensive coverage** of advances in molecular biology of cell death; risk factors and prevention; advances in diagnostics and stroke imaging; and therapeutic options, including a thorough review of thrombolytic agents and emerging data for endovascular therapy.
- **Brand-new chapters** on Intracellular Signaling: Mediators and Protective Responses; The Neurovascular Unit and Responses to Ischemia; Mechanisms of Cerebral Hemorrhage; Stroke Related to Surgery and Other Procedures; Cryptogenic Stroke; and Interventions to Improve Recovery after Stroke.
- **New information** on genetic risk factors; primary prevention of stroke; infectious diseases and stroke; recovery interventions such as robotics, brain stimulation, and telerehabilitation; and trial design.
- Advances in diagnostic tests, such as ultrasound, computed tomography (including CT angiography and CT perfusion), MRI (including MR perfusion techniques), and angiography.
- Extracted and highlighted evidence levels.
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