

英文版教材

全国高等学校教材

供基础、临床、预防、口腔医学类专业用

# Pathophysiology

病理生理学

主编 王建枝 金惠铭

Wang Jianzhi Jin Huiming



人民卫生出版社  
PEOPLE'S MEDICAL PUBLISHING HOUSE

## 第六章 計算機視聽

◎ 何大綱 教授

◎ 何大綱  
◎ 何大綱

◎ 何大綱 教授

◎ 何大綱 教授

◎ 何大綱 教授

◎ 何大綱 教授



全国高等学校教材  
供基础、临床、预防、口腔医学类专业用

# Pathophysiology

## 病理生理学

主编 王建枝 金惠铭

Wang Jianzhi Jin Huiming

编者(以姓氏笔画为序)

于艳秋(中国医科大学)

卢建(第二军医大学)

王小明(中国协和医科大学)

杨惠玲(中山大学中山医学院)

王华东(暨南大学医学院)

吴立玲(北京大学基础医学院)

王迪浔(华中科技大学同济医学院)

陆大祥(暨南大学医学院)

王建枝(华中科技大学同济医学院)

金惠铭(复旦大学上海医学院)

王树人(四川大学华西基础医学与  
法医学院)

徐长庆(哈尔滨医科大学)

人民卫生出版社

**图书在版编目(CIP)数据**

病理生理学/王建枝等主编. —北京：  
人民卫生出版社, 2005. 3

ISBN 7 - 117 - 06656 - 3

I . 病… II . 王… III . 病理生理学 IV . R363

中国版本图书馆 CIP 数据核字(2005)第 018587 号

**病 理 生 理 学**

---

**主 编:** 王建枝 金惠铭

**出版发行:** 人民卫生出版社(中继线 67616688)

**地 址:** (100078)北京市丰台区方庄芳群园 3 区 3 号楼

**网 址:** <http://www.pmph.com>

**E - mail:** [pmph@pmph.com](mailto:pmph@pmph.com)

**印 刷:** 北京人卫印刷厂

**经 销:** 新华书店

**开 本:** 850 × 1168 1/16      **印 张:** 16.75

**字 数:** 494 千字

**版 次:** 2005 年 3 月第 1 版 2005 年 3 月第 1 版第 1 次印刷

**标准书号:** ISBN 7 - 117 - 06656 - 3 / R · 6657

**定 价:** 26.00 元

**著作权所有,请勿擅自用本书制作各类出版物,违者必究**

(凡属质量问题请与本社发行部联系退换)

# Foreword

**Wang Dixun**

Pathophysiology is a science concerning the etiology and pathogenesis of diseases, as well as the mechanisms of functional and metabolic alterations in diseases.

The development of diseases has its objective law, which could be elucidated more correctly by dialectical points of view, such as the viewpoint of that all things invariably divide into two, the viewpoint of the struggle, identity and transformation of contradictions etc.. That is why that pathophysiology is recognized by some scholars as "Philosophy in Medicine".

Along with the development of cellular biology and molecular biology, the researches in the mechanisms of disease have been deepened. This has greatly enriched our knowledge of pathogenesis and the content of pathophysiology course.

Medical students learn the normal functions of organs and normal cellular metabolism in the courses of physiology and biochemistry. In the course of pathophysiology they will learn the alterations of function and metabolism and their mechanism in diseases, and their expression in patients. That means that the pathophysiology is one of the bridge courses between basic medical science and clinical medicine, which enables us to use the knowledge of basic medical science for the diagnosis and treatment of diseases.

In our country, the department of pathophysiology was set up in medical colleges about half a century ago, since then the course of pathophysiology has been given in medical education. By learning from Russia, America and Europe in combination with the situation in our own country, a course of pathophysiology with Chinese style has been established. In our teaching program, the pathophysiology of common pathological processes, especially their pathogenesis is emphasized and systematically discussed. However, the textbooks of pathophysiology from foreign countries involve a large space reviewing normal physiology and biochemistry, and the pathophysiology of individual diseases. An English textbook of pathophysiology suitable for our course taught in English or in two languages is urgently needed. I am sure that this book edited by Prof. Wang Jiangzi , Prof. Jin Huiming and Professors from several medical colleges may meet the demand and be advantageous to our medical education.

# Preface

**Wang Jianzhi & Jin Huiming**

Why do we write this book? To adapt ourselves to an increasing international communication, we are required to teach Pathophysiology in English. During the long discussion in choosing a textbook, we first considered to use an original English one. However, we have noticed that the emphasis in pathophysiology teaching is quite different between Chinese and Westerners. In general, the pathophysiology in Western countries focuses more on different diseases and emphasizes clinical signs and symptoms, which is to our understanding similar to clinical Internal Medicine. The readers are usually disappointed with the superficial analysis of the mechanisms laid on the signs and symptoms. On the contrary, we do not pinpoint any particular disease or clinical symptoms, but emphasize the general pathological processes and the underlying mechanisms of the representative disorders or processes. The major advantage of our teaching system in pathophysiology is the depth in explaining the pathogenesis of the disease, which compensates excellently to Internal Medicine. Additionally, we also thought about "Contemporary Pathophysiology", the only English text book of pathophysiology edited according to our system, by prof. Kong XS. However, the book was published in 1993 and several new chapters are not included. Therefore, we decided to write this book, and this motion was supported by the pathophysiologists all over the country.

The book is composed of 16 chapters, organized by four parts. The first part is brief introductions of what pathophysiology is and what disease is. The second part is about fundamental concepts and pathological processes, including fluid and electrolyte imbalances, acid and base disturbances, stress, fever, edema, ischemia and reperfusion, shock, multi-organic dysfunction, and hypoxia. Knowledge of these basic pathological processes is essential to understanding the mechanisms of the most common diseases. The third part of the book is called organic pathophysiology, which is a presentation of the pathophysiology of important organs, i. e., heart, lung, liver, kidney and brain; the emphasis in this part is still on the basic processes and mechanisms of the organic insufficiency or failure. The fourth part of the book is referred as cellular and molecular pathophysiology, including signal transduction and diseases, and cell apoptosis in diseases. Each chapter is divided into sections emphasizing the general concepts, etiology and pathogenesis, the alterations of metabolism and function, as well as the principles for the prevention and therapies.

The intended readers of the book will be medical students, including undergraduates and post-graduates, in their basic pathophysiology courses. We hope these students will find that the book makes a useful contribution to their understanding of how pathological agents cause various disease states. We also expect that physicians-in-training and physicians will find the book helpful in comprehending how and why various disease states appear. The clinical doctors will find the book useful as a refresher and update their understanding the mechanisms of diseases. Nurses and other practitioners will find that the concise format and broad/new scope of the book facilitate their understanding of basic disease entities.

We are most grateful to all the contributors for their hard and efficient work to make this book available in a limited time period. We greatly appreciate Prof. Roy C. Ziegelstein at the John Hopkins University School of Medicine, USA, Dr. Tomo Saric at the Center of

## **PREFACE**

Physiology and Pathophysiology, University of Cologne, Germany, prof. Chengxin Gong at NYS Institute for Basic Research, USA, and Prof. Wang Dixun at the Tongji Medical College for their critical review of the book. We would also like to thank all of our young colleagues in Pathophysiology Department, Tongji Medical College for the rudimentary form of the book and their full support. We thank Dr. Wang Xiaochuan and Zhang Guoping for the tedious secretory work.

Because of the limitation of our English writing skill, inaccuracies must have occurred. Readers are encouraged to contact us for pointing out such errors or offering comments or suggestions. Such feedback will be helpful for us to make a better version of this book in future.

# **Introduction**

---

**Wang Jianzhi**

## **What is pathophysiology?**

Pathophysiology is a subject to explore the rule of origin and evolution of disease processes and the underlying mechanisms. It is also referred as physiopathology, physiology of diseases, or physiology of disordered function. Different from "Pathology" that emphasizes the structural changes, pathophysiology focuses on the functional and metabolic alterations and the mechanisms underlying the development of diseases. Traditionally, techniques used in pathophysiology research were limited in systemic or organic levels, which are so called "functional experiments". With the development of cellular and molecular biology, numerous advanced methods have been employed in pathophysiology study, such as cell culture, radio- or fluorescence-labeling or probing, polymerase chain reaction (PCR), electrophoresis, Southern blot, Northern blot, Western blot, flow cytometry, and so on.

## **Why is Pathophysiology important?**

The study of pathophysiology is an essential introduction to clinical medicine and serves as a bridge between the basic medical science and clinical medicine. It enables the students, clinicians and other practitioners to understand why and how diseases develop and various clinical manifestations appear, what are the underlying mechanisms, and in so doing devise rational therapeutics.

## **How the chapters of the book are constructed?**

This book was written with the principles described above in mind. It was generally constructed by the orientation of basic concepts of particular diseased process, the etiology, pathogenesis, the functional and metabolic alterations that strengthen the underlying mechanisms, and the pathophysiological basis for prevention and therapeutics, in which the pathogenesis is the kernel in our pathophysiology teaching.

# **Content**

---

<b>Chapter 1 Conspectus Of Disease .....</b>	1
1. Concept of disease .....	1
2. Etiology of disease .....	1
3. Pathogenesis of disease .....	3
4. Outcome of disease .....	5
<b>Chapter 2 Disorders Of Water And Electrolyte Metabolism .....</b>	7
Body Fluid and Electrolyte Balance .....	7
1. Total fluid volume .....	7
2. Body fluid distribution .....	7
3. Body fluid composition .....	8
Osmolality of the Body Fluids .....	9
Mechanisms for Regulating Body Fluid and Electrolyte Balance .....	10
1. The sensation of thirst .....	10
2. Antidiuretic hormone .....	10
3. Aldosterone .....	12
4. The natriuretic peptide family .....	12
5. The guanylin family .....	13
Disorders of Water and Sodium Metabolism .....	14
1. Hyponatremia .....	14
2. Hypernatremia .....	14
3. Disorders of water and sodium metabolism with a normal serum sodium concentration .....	14
Hyponatremia .....	15
1. Hypovolemic hyponatremia .....	15
2. Hypervolemic hyponatremia .....	16
3. Normovolemic hyponatremia .....	17
Hypernatremia .....	17
1. Hypovolemic hypernatremia .....	18
2. Hypervolemic hypernatremia .....	19
3. Normovolemic hypernatremia .....	19
Isotonic Dehydration .....	19
Edema .....	20
1. Etiology and pathogenesis .....	20
2. Alterations of metabolism and function .....	22
Disorders of Potassium Metabolism .....	23
1. Potassium content and distribution .....	23
2. Maintenance of potassium balance .....	23
3. Potassium function .....	24
Hypokalemia .....	26
1. Etiology and pathogenesis .....	26
2. Alterations of metabolism and function .....	28
Hyperkalemia .....	30

## **CONTENT**

1. Etiology and pathogenesis .....	30
2. Alterations of metabolism and function .....	31
Pathophysiological Basis of Prevention and Treatment .....	33
Disorders of Magnesium Metabolism .....	33
Hypomagnesemia .....	34
1. Etiology and pathogenesis .....	34
2. Alterations of metabolism and function .....	35
3. Principles of treatment .....	36
Hypermagnesemia .....	36
1. Etiology and pathogenesis .....	36
2. Alterations of metabolism and function .....	36
3. Pathophysiological basis of prevention and treatment .....	36
Disorders of Calcium and Phosphorus Metabolism .....	36
Function of Calcium and Phosphorus .....	37
Hypocalcemia .....	38
1. Etiology and pathogenesis .....	38
2. Alterations of metabolism and function .....	38
3. Pathophysiological basis of prevention and treatment .....	39
Hypercalcemia .....	39
1. Etiology and pathogenesis .....	39
2. Alterations of metabolism and function .....	39
3. Pathophysiological basis of prevent and treatment .....	40
Hypophosphatemia .....	40
1. Etiology and pathogenesis .....	40
2. Alterations of metabolism and function .....	40
3. Principles of treatment .....	41
Hyperphosphatemia .....	41
1. Etiology and pathogenesis .....	41
2. Alterations of metabolism and function .....	41
3. Principles of treatment .....	41
Case Presentation .....	41
 <b>Chapter 3 Acid-Base Balance And Disturbances</b> .....	43
Acid-base Biochemistry .....	43
1. Generation of acids and bases .....	43
2. Henderson-Hasselbalch equation .....	44
Regulation of pH .....	44
1. Buffer systems .....	44
2. Respiratory regulation mechanisms .....	45
3. Renal regulation mechanisms .....	46
Laboratory Tests .....	48
1. pH .....	49
2. PaCO <sub>2</sub> .....	49
3. [HCO <sub>3</sub> <sup>-</sup> ] .....	49
4. Anion Gap (AG) .....	50
Simple Acid-base Disorders .....	50
1. Concept of simple acid-base disorders .....	50
2. Compensation for simple acid-base disorders .....	51
Metabolic Acidosis .....	51
1. Concept .....	51

## **CONTENT**

2. Primary causes .....	51
3. Compensation .....	52
4. Alteration of metabolism and function .....	52
Respiratory Acidosis .....	53
1. Concept .....	53
2. Primary causes .....	53
3. Compensation .....	53
4. Alteration of metabolism and function .....	54
Metabolic Alkalosis .....	54
1. Concept .....	54
2. Primary causes .....	54
3. Compensation .....	55
4. Alteration of metabolism and function .....	55
Respiratory Alkalosis .....	56
1. Concept .....	56
2. Primary causes .....	56
3. Compensation .....	56
4. Alteration of metabolism and function .....	56
Mixed Acid-Base Disorders .....	57
1. Metabolic alkalosis + Metabolic acidosis .....	57
2. Metabolic acidosis + Respiratory alkalosis .....	57
3. Metabolic acidosis + Respiratory acidosis .....	58
4. Metabolic alkalosis + Respiratory alkalosis .....	58
5. Metabolic alkalosis + Respiratory acidosis .....	58
6. Triple acid-base disorders .....	58
7. Judgment of acid-base disorders .....	58
Case Presentation .....	60
 <b>Chapter 4 Hypoxia .....</b>	61
Parameters of Blood Oxygen .....	61
1. Partial pressure of oxygen ( $PO_2$ ) .....	61
2. Oxygen capacity ( $CO_2\text{max}$ ) .....	61
3. Oxygen content ( $CO_2$ ) .....	61
4. Oxygen saturation ( $SO_2$ ) .....	61
5. $P_{50}$ .....	62
Classification, Etiology and Pathogenesis of Hypoxia .....	62
1. Hypotonic hypoxia .....	62
2. Hemic hypoxia .....	63
3. Circulatory hypoxia .....	63
4. Histogenous hypoxia .....	64
Alterations of Function and Metabolism .....	64
1. Respiratory system .....	64
2. Circulatory system .....	65
3. Hemic system .....	66
4. Central nervous system .....	66
5. Cellular alterations .....	67
Factors Affecting the Tolerance to Hypoxia .....	67
1. Oxygen consumption rate .....	67
2. Compensatory ability of the body .....	68
Oxygen Therapy and Oxygen Intoxication .....	68

## **CONTENT**

1. Pulmonary oxygen intoxication .....	68
2. Cerebral oxygen intoxication .....	68
Case Presentation .....	68
<b>Chapter 5 Fever .....</b>	<b>70</b>
Regulation of Normal Body Temperature .....	70
Etiology .....	71
1. Infectious factors .....	71
2. Non-infectious factors .....	72
Pathogenesis .....	72
1. Endogenous Pyrogens .....	72
Thermoregulation of Fever .....	74
1. Thermoregulating center .....	74
2. Routes of peripheral pyrogenic signals into thermoregulation center .....	75
3. Central mediators of fever .....	75
Alterations of Metabolism and Function .....	79
Pathophysiological Basis of Prevention and Treatment .....	80
Case Presentation .....	81
<b>Chapter 6 Dysfunction Of Cell Signaling In Diseases .....</b>	<b>83</b>
Major Pathways for Cell Signaling .....	83
1. G-protein-mediated cell signaling .....	83
2. Tyrosine kinase mediated signaling .....	84
3. Guanylyl cyclase (GC) mediated signaling .....	85
4. Intracellular and nuclear receptor signaling .....	85
Dysfunction of Cell Signaling in Diseases .....	86
1. Aberrant signal molecules in diseases .....	86
2. Aberrant receptors in diseases .....	86
3. Aberrant G-proteins in diseases .....	88
4. Aberrant intracellular signaling in diseases .....	89
5. Multiple signaling aberrations in diseases .....	90
6. Relationship between stimulants and pathological effects .....	91
Principles of Treatment .....	93
1. To regulate the level of extracellular molecules .....	93
2. To regulate the structure and the function of receptors .....	93
3. To regulate the level and modifications of intracellular messenger molecules and transducers .....	93
4. To regulate the level of nuclear transcription factors .....	94
Case Presentation .....	94
<b>Chapter 7 Cell Proliferation, Differentiation, Apoptosis And The Related Diseases .....</b>	<b>96</b>
Cell Proliferation and Diseases .....	96
1. Cell cycle and its control .....	96
2. Deregulation of cell proliferation and diseases .....	99
Cell Differentiation and Diseases .....	100
1. Control of cell differentiation .....	100
2. Differentiation and tumor .....	102
Cell Apoptosis and Diseases .....	102
1. Regulation of cell apoptosis .....	103
2. Abnormal cell apoptosis in diseases .....	105

## **CONTENT**

<b>Chapter 8 Stress And Stress-Related Diseases .....</b>	108
Terminology of Stress .....	108
1. Stress .....	108
2. Stressor .....	108
3. General adaptation syndrome (GAS) .....	109
Neuroendocrine Responses .....	110
1. Locus Ceruleus-norepinephrine neurons-sympathetic/adrenal medulla axis .....	110
2. Hypothalamus-pituitary-adrenal cortex axis .....	111
3. Other hormones in stress .....	111
Cellular and Humoral Responses .....	112
1. Acute phase proteins .....	112
2. Heat shock proteins .....	113
Functional and Metabolic Responses .....	115
1. Central nervous system .....	115
2. Immune system .....	116
3. Cardiovascular system .....	117
4. Digestive system .....	117
5. GenitoUrinary system .....	117
6. Metabolism .....	117
Stress-related Disease .....	118
1. Stress Ulcer .....	118
2. Stress and Cardiovascular Diseases .....	119
3. Stress and endocrine disorders .....	120
4. Stress and Psychosocial Disturbance .....	120
Pathophysiological Basis of Prevention and Treatment .....	121
Case Presentation .....	121
<b>Chapter 9 Coagulation-Anticoagulation Balance And Imbalance of Haemostatic System .....</b>	123
Overview of Haemostatic System .....	123
1. Vasospasm .....	123
2. Coagulation system .....	124
3. Anticoagulation System .....	126
4. Function of the fibrinolytic system .....	127
5. Role of endothelial cells .....	128
Imbalance in Haemostatic System .....	129
1. Bleeding Disorders .....	129
2. Thrombogenesis and thrombotic disorders .....	131
3. Blood vessel abnormality .....	133
4. Fibrinolytic factor abnormality .....	133
Disseminated Intravascular Coagulation .....	134
1. Etiology .....	134
2. Pathology .....	135
3. Pathogenesis .....	135
4. Factors influence the development of DIC .....	137
5. Clinical classification of DIC .....	137
6. Alterations of metabolism and function .....	138
7. Pathophysiological Basis of Prevention and Treatment .....	139
Case Presentation .....	140

## **CONTENT**

<b><i>Chapter 10 Shock</i></b> .....	142
Etiology and Classification .....	142
1. Hypovolemic shock .....	142
2. Cardiogenic shock .....	142
3. Infectious shock .....	142
4. Anaphylactic shock .....	142
5. Neurogenic shock .....	143
Stages of Shock and Their Pathological Changes .....	143
1. Ischemic hypoxia stage .....	143
2. Stagnant hypoxia stage .....	145
3. Organic failure stage .....	146
Roles of Humoral Factors in Pathogenesis of Shock .....	147
1. Catecholamine and angiotensin .....	147
2. Cytokines .....	147
3. Adhesion molecules .....	148
4. Endothelium-derived vasoactive mediators .....	148
5. Activation of complement cascade .....	148
6. Lysosomal enzymes .....	148
7. Redox imbalance .....	148
Functional and Metabolic Changes .....	149
1. Neuroendocrine system .....	149
2. Cardiovascular system .....	149
3. Hematologic system .....	150
4. Immune system .....	150
5. Lung .....	150
6. Kidney .....	151
7. Gastrointestinal .....	151
8. Liver .....	151
9. Metabolic derangement .....	151
10. Cellular responses .....	152
Pathophysiological Basis of Prevention and Treatment for Shock .....	153
1. Volume replacement .....	153
2. Application of vasoactive drugs .....	153
3. Treatment on acidosis .....	153
4. Treatment of DIC or organic dysfunction (see related chapter) .....	153
5. Others .....	153
Multiple organ dysfunction syndrome .....	153
1. Systemic inflammatory response (SIRS) .....	154
2. Compensatory anti-inflammatory response syndrome (CARS) .....	155
3. Mixed antagonist response syndrome .....	155
Case Presentation .....	155
<b><i>Chapter 11 Ischemia-Reperfusion Injury</i></b> .....	157
Etiology of Ischemia-Reperfusion Injury .....	157
1. Duration of ischemia .....	157
2. Dependency on oxygen supply .....	157
3. The condition of reperfusion .....	157
Mechanisms of Ischemia-Reperfusion Injury .....	158
1. Injury of free radicals .....	158
2. Calcium overload .....	161

## **CONTENT**

3. The endothelial injury and neutrophil activation .....	163
<b>Alterations of Function and Metabolism during Ischemia-Reperfusion Injury .....</b>	<b>164</b>
1. Myocardial ischemia-reperfusion injury .....	164
2. Cerebral ischemia-reperfusion injury .....	166
3. Hepatic ischemia-reperfusion injury .....	166
4. Renal ischemia-reperfusion injury .....	167
<b>Pathophysiological Basis of Prevention and Treatment .....</b>	<b>167</b>
1. Controlling reperfusion conditions .....	167
2. Antioxidants and free radical scavengers .....	167
3. Inhibitors of neutrophils activation .....	168
4. Calcium antagonists or calcium channel blocker .....	168
<b>Case Presentation .....</b>	<b>168</b>
 <b>Chapter 12 Heart Failure .....</b>	<b>170</b>
<b>Etiology and Classifications .....</b>	<b>170</b>
1. Underlying causes .....	170
2. Precipitating factors .....	171
3. Classifications .....	172
<b>Pathogenesis .....</b>	<b>172</b>
1. Decreased myocardial contractility .....	172
2. Diastolic dysfunction .....	175
3. Asynergic myocardial contraction and relaxation .....	175
4. Endothelial dysfunction .....	176
<b>Compensatory Responses .....</b>	<b>176</b>
1. Cardiac compensation .....	177
2. Systemic compensation .....	177
3. Neurohormonal compensation .....	178
<b>Alterations of Metabolism and Function .....</b>	<b>180</b>
1. Congestion of pulmonary circulation .....	180
2. Congestion of systemic circulation .....	181
3. Low cardiac output .....	181
<b>Principles of Treatment .....</b>	<b>181</b>
1. General treatment .....	181
2. Improving cardiac functions .....	182
3. Reducing afterload and preload .....	182
4. Regression of ventricular hypertrophy .....	182
5. Controlling edema .....	182
<b>Case Presentation .....</b>	<b>182</b>
 <b>Chapter 13 Respiratory Failure .....</b>	<b>184</b>
<b>Etiology and Pathogenesis .....</b>	<b>184</b>
1. Ventilatory disorder .....	184
2. Diffusion disorder .....	186
3. Ventilation and perfusion imbalance .....	187
4. Anatomic shunt .....	189
<b>Alterations of Function and Metabolism .....</b>	<b>189</b>
1. Acid-base imbalance and electrolyte imbalance .....	190
2. Respiratory system .....	190
3. Cardiovascular system .....	190
4. Central nervous system .....	190

## **CONTENT**

Pathophysiological basis of Treatment .....	191
1. Treating the causes of respiratory failure .....	191
2. Increasing PaO <sub>2</sub> .....	191
3. Decreasing PaCO <sub>2</sub> .....	191
4. Treating the consequences of hypoxemia and hypercapnia, for example, the acidosis, heart failure etc. .....	191
Case Presentation .....	191
 <b>Chapter 14 Hepatic Failure</b> .....	194
Etiology .....	194
Hepatic Insufficiency .....	194
1. Injury of Hepatocytes and Hepatic Dysfunction .....	194
2. Metabolic Disorders of Water and Electrolytes .....	195
3. Disorders in Production of Bile Salts and Elimination of Bilirubin Disorders .....	195
4. Hepatic Enteric Endotoxemia .....	195
Hepatic Encephalopathy .....	195
Etiology and Classification .....	196
Pathogenesis .....	196
1. Ammonia intoxication .....	196
2. False neurotransmitters and amino acid imbalance .....	198
3. The gamma-aminobutyric acid hypothesis .....	199
Precipitating Factors .....	200
Principles of Treatment .....	201
Hepatorenal Syndrome .....	202
Pathogenesis .....	202
1. Stimulated sympathetic nervous system .....	202
2. Activated renin-angiotensin-aldosterone system .....	202
3. Increased vasopressin release .....	202
4. Other humoral factors .....	202
Principles of Treatment and Prevention .....	203
Case Presentation .....	204
 <b>Chapter 15 Renal Failure</b> .....	206
Basic Pathological Taches for Renal Failure .....	206
1. Dysfunction of glomerular filtration .....	206
2. Renal tubular dysfunction .....	207
3. Renal endocrine dysfunction .....	207
Acute Renal Failure .....	208
Etiology and Classification .....	209
1. Prerenal ARF .....	209
2. Intrarenal ARF .....	210
3. Postrenal ARF .....	210
Pathogenesis .....	210
1. Renal hemodynamic alterations .....	210
2. Renal glomerular injury .....	211
3. Renal tubular injury .....	211
4. Renal cell injury and its mechanisms .....	212
Alterations of Metabolism and Function .....	213
1. The oliguric stage .....	213
2. The diuretic stage .....	215

## **CONTENT**

3. The recovery stage .....	215
Pathophysiological Basis of Prevention and Treatment .....	216
Chronic Renal Failure .....	216
1. Etiology .....	216
2. Clinical courses .....	217
Pathogenesis .....	217
1. Mechanism of compensation .....	217
2. Mechanism of decompensation .....	218
Alterations of Metabolism and Function .....	219
1. Alteration of urine .....	219
2. Azotemia .....	219
3. Water, electrolytes and acid-base imbalance .....	220
4. Renal hypertension .....	221
5. Renal osteodystrophy .....	221
6. Tendency to hemorrhage .....	221
7. Renal Anemia .....	221
Uremia .....	222
1. Pathogenesis .....	222
2. Functional and Metabolic Alterations .....	223
Pathophysiological Basis of Prevention and Treatment .....	225
Case Presentation .....	225
 <b>Chapter 16 Brain Dysfunction</b> .....	228
Introduction .....	228
1. Characteristics of brain structure, metabolism and function .....	228
2. Characteristics of brain diseases .....	228
Cognitive Disorders .....	229
1. Structural basis of cognition .....	229
2. Major manifestations of cognitive disorders .....	230
3. Etiology and pathogenesis .....	231
Principles for treatment of cognitive disorders .....	235
1. General neuroprotective treatments .....	235
2. Maintenance of normal neurotransmitter level .....	235
3. Surgery .....	235
Consciousness Disorder .....	235
1. The structural basis of the brain in consciousness and consciousness disorders .....	236
2. Major manifestations in consciousness disorders .....	236
3. The etiology and pathogenesis of consciousness disorder .....	237
4. Systemic disturbance caused by consciousness disorder .....	238
Principles of prevention and therapy .....	240
1. Urgent management .....	240
2. Making a definite diagnosis as soon as possible .....	240
3. Monitoring vital signs and consciousness state .....	240
4. Brain protections .....	240
Case Presentation .....	240