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- MiR-17-3p Inhibits Angiogenesis by Downregulating Flk-1 in the Cell Growth Signal Pathway: Yin, R.; Wang, R. (Shanghai); Guo, L. (Nanjing); Lu, Y. (Nanjing)
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A new approach to treating AYA with hematological malignancies

Adolescents and Young Adults with Hematological Disorders
Challenges and Perspectives

Editors
Martin S. Tallman
Pia Raanani

The distinct biology of haematological disorders as well as other age-related issues in adolescent and young adult (AYA) patients deserves unique psychological and medical attention. It emphasizes the necessity for a treatment approach taking into consideration their special needs. These include fertility considerations, survivorship issues, psychological support, adherence to treatment difficulties and other dilemmas and problems exclusive to this group of patients. AYA patients may usually better support intensive treatments and if possible should be referred to special centres and participate in clinical trials. In recent years the focus on AYA patients in oncology and hematopoiesis has increased. Still a distinct approach to these patients is an unmet need.

This special issue tries to increase awareness for this group of patients as well as to cover the wide spectrum of hematological disorders that is pertinent to AYA patients who face special therapeutic challenges. This publication is of interest for physicians dealing with AYA, especially in the field of hematology and oncology, as well as paramedical staff including nurses, psychologists, social workers and pharmacists.

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Most endocrine diseases, if not treated or controlled, have cardiovascular manifestations. Both GH deficiency and GH excess impair cardiovascular functions, e.g. in patients with acromegaly, who have a shortened life expectancy and increased mortality mostly due to cardiovascular complications in uncontrolled disease. Moreover, Cushings syndrome and diabetes are well known for metabolic and cardiovascular manifestations, as well as hypo- and hyperthyroidism. Both adipose tissue and the heart have been increasingly recognized as organs with partially endocrine functions, which produce adipokines and brain natriuretic peptide, respectively, and influence a number of cardiovascular parameters. Primary aldosteronism as a cause for secondary hypertension is still a great challenge to detect and diagnose properly; however, new important discoveries have been made regarding the genetics of this probably underestimated cause of hypertension. Written by distinguished researchers in their respective fields, this book will give both researchers and clinicians an excellent update on all these topics, as well as provide insight into the use of hormones as treatment tools in more controversial areas.