

Literatura ACTA MEDICINAE 2–3/2023 Kardiologie | Diabetologie

- 3 Duální inhibice AT₁ receptoru pro angiotenzin II a neprilyzinu**
prof. MUDr. Lenka Špinarová, Ph.D., FESC | prof. MUDr. Jindřich Špinar, CSc., FESC | prof. MUDr. Jiří Vítovec, CSc., FESC
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- 3 SGLT2 inhibitory a srdeční selhání včetně HFpEF a studie DELIVER**
prof. MUDr. Jindřich Špinar, CSc., FESC | prof. MUDr. Lenka Špinarová, Ph.D., FESC | prof. MUDr. Jiří Vítovec, CSc., FESC
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- 5 Aktuální epidemiologická charakteristika populace pacientů s diabetem v ČR**
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- 6 Vývoj léčby diabetu za posledních deset let**
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MUDr. Michal Krčma, Ph.D. Diabetologické centrum 1. interní kliniky LF UK a FN Plzeň
- 6 Tři schválené indikace jedné molekuly: dapagliflozin**
doc. MUDr. Alena Šmahelová, Ph.D. III. interní gerontometabolická klinika FN a LF UK, Hradec Králové
- 6 Semaglutid – látka mnoha tváří a přínosů**
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- 6 Inzulínová rezistence a obezita u pacientů s diabetes mellitus 1. typu**
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- 7 Diabetes mellitus a chřipka aneb jak snadno snížit riziko závažných komplikací a mortality**
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- 7 Kardiovaskulární bezpečnost antidiabetik v populaci seniorů**
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prof. MUDr. Milan Kvapil, CSc. Geriatrická interní klinika 2. LF UK a FN v Motole, Praha, Česká diabetologická společnost ČLS JEP
- 7 Aktuální možnosti ovlivnění životní prognózy diabetiků se srdečním selháním**
MUDr. Kateřina Helánová, Ph.D. | prof. MUDr. Mgr. Jiří Pařenica, Ph.D. Interní kardiologická klinika FN Brno a LF MU, Brno
- 7 Kdy a proč IDegLira a IDegAsp aneb inzulínoterapie a poruchy kognice**
Přednáška doc. MUDr. Aleny Šmahelové, Ph.D., z III. interní gerontometabolické kliniky LF UK a FN Hradec Králové
- 8 Léčba agonisty GLP-1: od zralosti k dlouhověkosti**
Přednáška MUDr. Michala Žourka, Ph.D., z I. interní kliniky LF UK a FN Plzeň

Duální inhibice AT₁ receptoru pro angiotenzin II a neprilyzinu

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SGLT2 inhibitory a srdeční selhání včetně HFpEF a studie DELIVER

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Dapagliflozin v léčbě nemocných se srdečním selháním. Metaanalýza studií DAPA-HF a DELIVER

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Dapagliflozin v léčbě nemocných se srdečním selháním – komentář k článku

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Kardiovaskulární riziko u revmatoidní artritidy

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Porovnání aktuálních doporučených postupů pro diagnostiku a léčbu srdečního selhání evropských a amerických odborných společností

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- 1 **McDonagh, T. A. – Metra, M. – Adamo, M., et al.**: 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure: developed by the Task Force for the diagnosis and treatment of acute and chronic heart failure of the European Society of Cardiology (ESC). With the special contribution of the Heart Failure Association (HFA) of the ESC. *Eur J Heart Fail*, 2022, 24, s. 4–131.
- 2 **Heidenreich, P. A. – Bozkurt, B. – Aguilar, D., et al.**: 2022 AHA/ACC/HFSA Guideline for the management of heart failure: a report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines. *Circulation*, 2022, 145, s. e895–e1032.
- 3 **Bayes-Genis, A. – Aimo, A. – Metra, M., et al.**: Head-to-head comparison between recommendations by the ESC and ACC/AHA/HFSA heart failure guidelines. *Eur J Heart Fail*, 2022, 24, s. 916–926.

Jak zahájit antihypertenzní léčbu podle nových doporučení pro léčbu hypertenze. Diagnostické a léčebné postupy u arteriální hypertenze (ČSH 2022)

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- 1 **Widimský, J. – Filipovský, J. – Ceral, J., et al.**: Diagnostické a léčebné postupy u arteriální hypertenze ČSH 2022. Česká společnost pro hypertenzi. Suppl. 2022, s. 1–25. Dostupné z: https://www.hypertension.cz/wp-content/uploads/2023/01/Widimsky_guidelines-CSH-2022.pdf, vyhledáno 20. 2. 2023.
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Landiolol a argipresin u kriticky nemocné těhotné pacientky – kazuistika

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Deficit železa a úskalí jeho diagnostiky v kardiologii

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Aktuální epidemiologická charakteristika populace pacientů s diabetem v ČR

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Vývoj léčby diabetu za posledních deset let

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Možnosti hybridních smyček v léčbě diabetu 1. typu v ČR

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Tři schválené indikace jedné molekuly: dapagliflozin

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Semaglutid – látka mnoha tváří a přínosů

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Inzulínová rezistence a obezita u pacientů s diabetes mellitus 1. typu

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Diabetes mellitus a chřipka aneb jak snadno snížit riziko závažných komplikací a mortality

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Kardiovaskulární bezpečnost antidiabetik v populaci seniorů

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Aktuální možnosti ovlivnění životní prognózy diabetiků se srdečním selháním

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Kdy a proč IDegLira a IDegAsp aneb inzulinoterapie a poruchy kognice

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Léčba agonisty GLP-1: od zralosti k dlouhověkosti

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