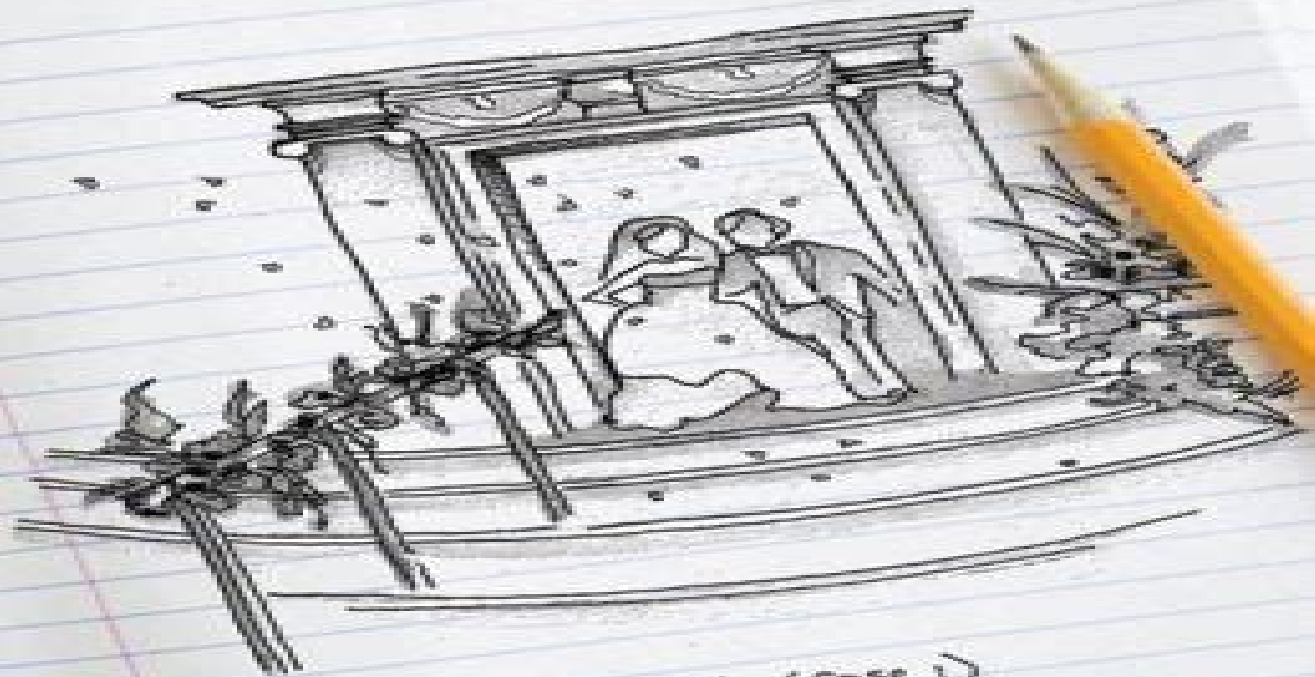


UNDERSTANDING HUGHES SYNDROME

Case Studies for Patients

GRAHAM R. V. HUGHES



'late for the wedding' (Case 1)

Understanding Hughes Syndrome Understanding Hughes Syndrome

Kay Thackray



Understanding Hughes Syndrome Understanding Hughes Syndrome:

Understanding Hughes Syndrome Graham Hughes,2010-01-23 Along with AIDS antiphospholipid syndrome was the major medical discovery of the late 20th century so for many it is still deemed a new disease The discovery of sticky blood commonly known as antiphospholipid syndrome or Hughes Syndrome came out of years of observation of patients who had developed lupus Many specialists in the 1970s were interested in the neurological aspects of lupus and Dr Hughes among others spent a number of years studying the mechanisms of brain inflammation In the mid 1970s Hughes observed a number of young women with a form of viral paralysis where interestingly many of them carried an antibody in their blood actually directed against phospholipid one of the components of brain and spinal cord It quickly became apparent that individuals who had anti phospholipid antibodies suffered from a tendency not only to develop brain and spinal cord symptoms but also a tendency to develop both vein and artery thrombosis As investigation continued it became apparent that these symptoms were not just confined to lupus patients but occurred in others too specifically those with severe migraines with repeated strokes with memory loss and in women with recurrent miscarriage

Understanding Hughes Syndrome Graham Hughes,2009-03-27 Along with AIDS antiphospholipid syndrome was the major medical discovery of the late 20th century so for many it is still deemed a new disease The discovery of sticky blood commonly known as antiphospholipid syndrome or Hughes Syndrome came out of years of observation of patients who had developed lupus Many specialists in the 1970s were interested in the neurological aspects of lupus and Dr Hughes among others spent a number of years studying the mechanisms of brain inflammation In the mid 1970s Hughes observed a number of young women with a form of viral paralysis where interestingly many of them carried an antibody in their blood actually directed against phospholipid one of the components of brain and spinal cord It quickly became apparent that individuals who had anti phospholipid antibodies suffered from a tendency not only to develop brain and spinal cord symptoms but also a tendency to develop both vein and artery thrombosis As investigation continued it became apparent that these symptoms were not just confined to lupus patients but occurred in others too specifically those with severe migraines with repeated strokes with memory loss and in women with recurrent miscarriage

Sticky Blood Explained Kay Thackray,2002 The description by Graham Hughes of the antiphospholipid syndrome or Hughes Syndrome is one of the medical landmarks of the 20th century There is something of a fashion in science to play down clinical discoveries as being somehow less ground breaking than basic laboratory based observations Here is a disease a medical discovery which should turn such fashions around In a series of brilliant clinical observations Dr Hughes not only pieced together what is now clearly a common and important disease but also with his team set up the blood tests and treatment guidelines which are used world wide Kay Thackray describes the condition as a patient providing a clear practical guide to living life

Hughes Syndrome Graham Hughes,2001-04-02 As with any delicate machine the human body can be profoundly affected by its supply of vital running materials Thus the tendency for the blood

to clot excessively has the potential to cut off the oxygen supply to any organ of the body In 1983 Dr Graham Hughes and his team in London described a syndrome and subsequently developed simple blood tests to diagnose the condition This syndrome is characterised by thrombosis both in limbs and internal organs headaches memory loss strokes and in pregnant women placental clotting and recurrent miscarriage The syndrome now known worldwide as Hughes Syndrome or the antiphospholipid syndrome is common being responsible for example for up to 1 in 5 cases of young stroke More important it is treatable This book provides the first in depth description of the syndrome for patients

Positive Options for

Antiphospholipid Syndrome (APS) Triona Holden,2003-08-01 This book contains information on an increasingly common autoimmune disorder Also called sticky blood and Hughes Syndrome APS makes one's blood clot too easily creating high risk of stroke thrombosis and premature heart attack It is also implicated in many other health problems including repeated miscarriages neurological problems early dementia and migraines It is often associated with lupus and mimics the symptoms of other diseases including MS Symptoms include migraines and headaches recurrent miscarriage memory loss slurred speech blood clots poor circulation muscle pain and cramps blurred vision extreme fatigue epilepsy strokes thrombosis and a form of angina Because of lack of knowledge of APS in the medical establishment sufferers are often misdiagnosed with MS or other more life threatening conditions This book helps the reader identify the symptoms and provides important information on diagnosis and treatment of APS It contains many moving stories explaining how people eventually got a diagnosis their symptoms the impact of APS on their lives and whether or not treatment has worked Written in collaboration with Dr Graham Hughes the major researcher of APS in the UK this book provides a clearly written informative look at an important but little known disease

Hughes Syndrome Munther A. Khamashta,2000 In 1983 Graham Hughes described a syndrome in which the blood has a tendency to clot Hughes syndrome is at the root of diverse conditions such as stroke leg vein thrombosis and recurrent abortion This text addresses the complete range of features produced by this common disorder which is also known as antiphospholipid syndrome The condition can affect any organ and is treated using commonly available drugs including low dose aspirin and warfarin This book fulfils the need for a cross disciplinary clinical textbook and contains contributions from the leading international authorities This book is for those who might have a clinical or scientific interest in this condition rheumatologists haematologists obstetricians and neurologists

Mental

State Understanding: Individual Differences in Typical and Atypical Development Daniela Bulgarelli,Anne Henning,Paola Molina,2017-09-13 The current book addresses the development of mental state understanding in children with typical and atypical population and reports new suggestions about the way to evaluate it and to support it through training The presented frame is multifaceted In respect to typical populations the role of maternal reflective functioning language communication and educational contexts has been deepened and the association with internalizing externalizing behaviors performances in spatial tasks and pragmatics has been addressed as well As to atypical populations deficits in

mental states understanding are reported for children with different developmental disorders or impairments as the agenesis of the corpus callosum Down Syndrome preterm birth Autism Spectrum Disorder hearing impairment and personality difficulties such as anxiety Overall the papers collected in our book allow a better understanding of the mechanisms influencing mental state understanding and the effects of mental state comprehension on development **The**

Autoimmune Diseases M. Eric Gershwin, George C. Tsokos, 2013-12-03 Since publication of the 4th Edition of The Autoimmune Diseases in 2006 the understanding of the immune mechanisms underlying autoimmunity and autoimmune disease has significantly deepened and broadened This fully revised 5th Edition incorporates new material and combines common themes underlying inductive and effector mechanisms and therapies that relate generally to the autoimmune disorders It discusses the biological basis of disease at genetic molecular cellular and epidemiologic levels and includes expanded coverage of autoinflammatory disease and autoimmune responses to tumors Gives a thorough and an important overview on the entire field framing individual disease chapters with information that compares and contrasts each disorder and therapy Provides thorough up to date information on specific diseases along with clinical applications in an easily found reference for clinicians and researchers interested in certain diseases Keeps readers abreast of current trends and emerging areas in the field Ensures that content is not only up to date but applicable and relevant **How to Stay Sane in Pain**

Karen Drennan-McEwan, 2019-02-15 It s estimated that 1 5 million Americans nearly five million people worldwide have some form of lupus Current data suggest it s more common than cystic fibrosis leukemia muscular dystrophy and multiple sclerosis combined At present the disease is unfamiliar to most and is widely misunderstood This leads to high levels of misdiagnosis belated diagnosis or misdiagnosis that is potentially life threatening It could be a leading sleeper disease of modern times with people suffering unacknowledged and untreated In How to Stay Sane in Pain author Karen Drennan McEwan clarifies the key symptoms of the disease which include chronic pain and explains how it is currently diagnosed and treated She offers a look at its history medications and their main side effects From the author s perspective of someone who suffers personally from lupus as well as other patients testimonies this guide describes how to achieve resilience and calm despite the disease Drennan McEwan offers a step by step mind body approach an approach rooted in the author s experience of a massive lupus flare and utilizing her training as a counselor and psychotherapist [Atlas of X-Linked Intellectual Disability Syndromes](#)

Roger E. Stevenson, Charles E. Schwartz, R. Curtis Rogers, 2012-07-12 The Atlas of Intellectual Disability Syndromes presents a concise description of 150 clinically distinctive syndromes caused by genes on the X chromosome Each entry includes photographs and a differential matrix of similar syndromes Appendices identify syndromes with common features and provide the location or mapping limits and function of responsible genes

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Understanding Hughes Syndrome Understanding Hughes Syndrome Introduction

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