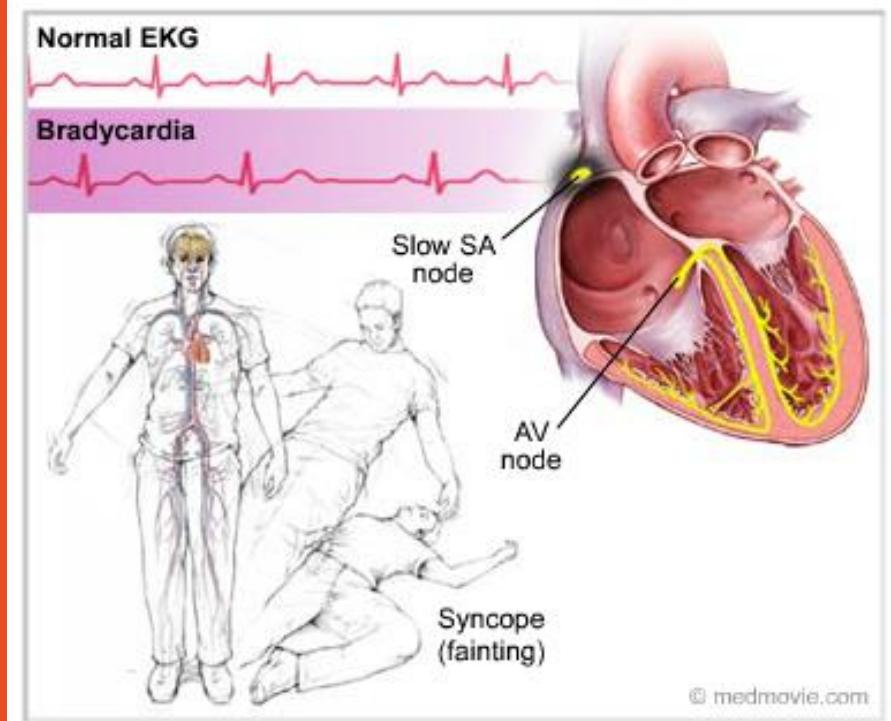


## Adams-Stokes Disease



# STOKES-ADAMS SYNDROME AND HOMOEOPATHY

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## DEFINITION

Stokes-Adams Syndrome is defined as an abrupt, transient loss of consciousness due to sudden but prominent decrease in the cardiac output, caused by sudden change in the heart rate or rhythm (Psora).

The patients with Stokes-Adams syndrome may have seizures during periods of cerebral ischemia (Psora). Although partial or complete heart block is usually present during asymptomatic periods, many arrhythmias may produce syncopal episodes with or without the presence of previously established complete heart block (Psora/ Syphilis). "Arrhythmia-induced syncope" is a more specific term and includes the primary cause of the decreased cerebral blood flow.

## ETYMOLOGY

Stokes-Adams disease, Adams-Stokes syndrome, Adams-Stokes disease

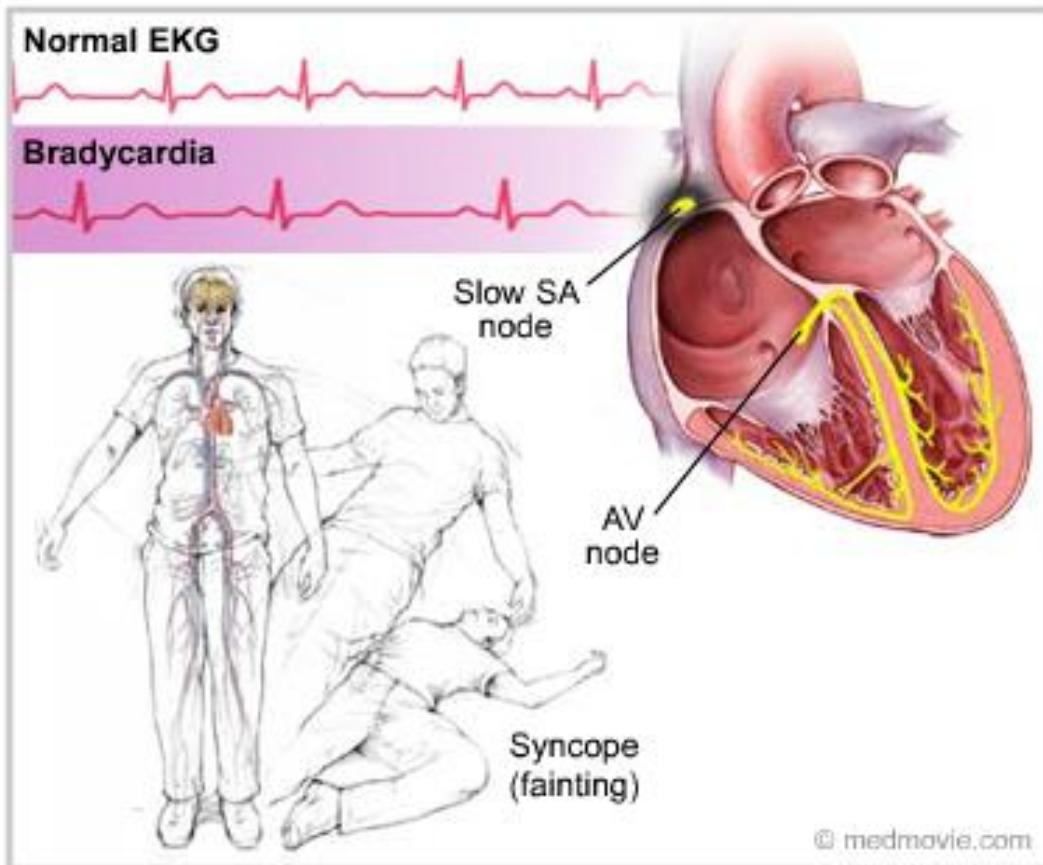
## HISTORICAL BACKGROUND

- ♥ Robert Adams (1791-1875) and William Stokes (1804-1877) were both Irish physicians who described syncope associated with bradycardia in 1827 and the same association in 1846 respectively. (Stokes is also remembered for Cheyne-Stokes breathing.)
- ♥ Thomas Spens (1764-1842), a Scottish physician, also described a similar syndrome.

## CLINICAL FEATURES

- ♥ Collapse, usually without warning (Psora)
- ♥ Loss of consciousness usually between about 10 and 30 seconds (Psora)
- ♥ Pallor, followed by flushing on recovery (Psora)
- ♥ Occasionally, some seizure-like activity if the attack is prolonged (Psora/ Syphilis)
- ♥ Pulse slow, usually less than 40 beats per minute (Psora/ Syphilis)
- ♥ Fairly rapid recovery, although the patient may be confused for a while afterwards (Psora)
- ♥ Typically, complete (third-degree) heart block present on the ECG during an attack but other ECG abnormalities such as tachy-brady syndrome may be reported (Psora/ Syphilis/ Sycosis)
- ♥ Attacks vary from single to a number of times in one day
- ♥ Attacks not posture-related

## Adams-Stokes Disease



## ETIOLOGY

Causes of Adams-Stokes syndrome include heart block, asystole or ventricular fibrillation. With congenital heart block, it has been described as being precipitated by bradycardia or tachycardia. Main causes are described below-

### HEART BLOCK

#### ATRIOVENTRICULAR (AV) NODAL DISEASE

It is partial or complete interruption of impulse transmission from the atria to the ventricles. The most common cause is idiopathic fibrosis. (Psora/ Syphilis/ Sycosis)

### DRUGS

Toxic Effect of Drugs; Digitalis is the drug most frequently responsible for producing complete heart block. Antiarrhythmic agents may also precipitate stroke. (Causa occasionalis)

### ELECTROLYTE DISTURBANCE

Potassium is the most important electrolyte in relation to A-V conduction. Hyperkalemia decidedly decreases the ventricular rate in pre-existing heart block. Large doses of potassium salts may cause A-V block. (Causa occasionalis)

- ♥ Acidosis depresses the ventricular pacemaker in complete heart block and may precipitate Stokes-Adams syncope.
- ♥ Alkalosis, hypokalemia and hypernatremia increase A-V conduction and may reverse heart block. However, alkalosis and hypokalemia may increase ventricular ectopic activity, leading to ventricular tachycardia or fibrillation.

### FIBROSIS

Areas of fibrosis usually, associated with ischemia, involving the conduction system distal to the common bundle (trifascicular block), either alone or in association with scattered areas of fibrosis throughout the myocardium may cause heart block. In elderly people this has been attributed to "sclerosis of the left side of the cardiac skeleton" due to wear and tear caused by repeated pull of the contracting left ventricular musculature. (Psora/ Syphilis/ Sycosis)

### INFILTRATIVE PROCESSES

These include amyloidosis, sarcoidosis, tumors, Hodgkin's disease, multiple myeloma, Paget's disease etc. (Psora/ Syphilis/ Sycosis)

### MYOCARDIAL INFARCTION

The complete heart block is frequently due to extensive myocardial necrosis involving the right bundle and the two divisions of the left bundle (trifascicular block) rather than to a conduction defect in the A-V junction. (Psora/ Syphilis)

### MYOCARDITIS

Myocarditis of various causes may involve the conduction system, resulting in complete heart block and syncopal episodes. (Psora/ Sycosis)

## RHEUMATIC DISEASES

These include ankylosing spondylitis, Reiter's syndrome, rheumatoid arthritis, scleroderma, sarcoidosis etc. (Psora/ Syphilis/ Sycosis)

## STRUCTURAL OR VALVULAR HEART DISEASE

In valvular heart disease valve calcification or endocarditis may involve the conduction system and produce incomplete or complete heart block. (Syphilis/ Sycosis)

## CONGENITAL DEFECTS

Some cases of complete heart block in adults are congenital in etiology, with or without associated cardiac defects. But incidence of Adam Stokes syndrome is common with these patients. (Syphilis)

## DIPHTHERIA

It has long been known to be associated with conduction defects, particularly complete heart block. (Psora/ Sycosis)

## CONNECTIVE TISSUE DISORDERS

Heart block has been reported during the course of connective tissue disease and in association with degenerative skeletal muscle and nervous system disorders. (Psora/ Syphilis/ Sycosis)

## PRIMARY AND METASTATIC NEOPLASTIC DISEASE

Neoplastic diseases of the heart (e.g., carcinoma, sarcoma, and leukemia) secondary to metastasis to the septum may cause block or conduction defects. (Psora/ Syphilis/ Sycosis)

## METABOLIC DISEASES

Metabolic cardiomyopathies include amino acid, lipid and mitochondrial disorders, as well as storage diseases. A number of metabolic disorders are associated with both myopathy and cardiomyopathy. These include the glycogen storage diseases, i.e. acid maltase deficiency (infantile, childhood, and adult onset), McArdle disease, and debrancher and brancher deficiencies. (Psora/ Syphilis/ Sycosis)

## INJURIES

Non-penetrating chest injury is an occasional cause of complete heart block. (Causa occasionalis)

## ASYSTOLE

### ELECTROCARDIOGRAPHIC MECHANISMS AND ARRHYTHMIAS

Stokes-Adams attacks may be due to extreme bradycardia or to a variety of tachyarrhythmias, particularly ventricular tachycardia and ventricular fibrillation. (Psora/ Syphilis)

The arrhythmias responsible for Stokes-Adams syncope may be divided into seven groups-

- ♥ Sudden interruption of atrioventricular impulse transmission causing transient asystole.
- ♥ Atrial standstill with failure of the Junctional pacemaker resulting in ventricular asystole.
- ♥ Asystole in the presence of established heart block.
- ♥ Paroxysmal ventricular tachycardia or fibrillation in the presence of complete heart block.
- ♥ Paroxysmal ventricular tachycardia or fibrillation during normal A-V conduction.

- ♥ Supraventricular arrhythmias.
- ♥ Combined forms. Uncommonly, paroxysmal tachyarrhythmias may be followed by a period of asystole due to a delay in automaticity of pacemakers which have been suppressed during the tachycardia.



### VENTRICULAR FIBRILLATION

Electrocution accidents or injury to the heart, heart attack, congenital heart disease, heart muscle disease, including cardiomyopathies, heart surgery, narrowed coronary arteries, medications etc. can cause ventricular fibrillation and lead to Adam Stokes syndrome. Sudden cardiac death (commotio cordis), most often occurs in athletes who have had an injury over the surface of the heart. (Psora/ Syphilis/ Sycosis)

### DIFFERENTIAL DIAGNOSIS

- ♥ A fast tachyarrhythmia (may also reduce cardiac output but does not usually have the same brief but dramatic effect)
- ♥ Carotid sinus hypersensitivity
- ♥ Drop attacks
- ♥ Epilepsy (if convulsions occur)
- ♥ Orthostatic hypotension
- ♥ Syncope due to hypoperfusion - eg, due to hypovolaemia
- ♥ Transient ischaemic attack
- ♥ Vasovagal fainting

### TREATMENT

The aim of therapy for arrhythmia-induced syncope is-

- ♥ Prompt restoration of the circulation during cardiac arrest
- ♥ Restoration of an intrinsic cardiac rhythm adequate to maintain cerebral blood flow
- ♥ Prevention of recurrent episodes

### PACEMAKER THERAPY

Because of the unpredictable, potentially fatal nature of Stokes- Adams attacks electrical pacing has become the treatment of choice when syncope occurs in patients with complete heart block.

The general indications for pacemaker insertion include-

- ♥ Complete heart block associated with congestive heart failure
- ♥ Complete heart block with Stokes-Adams syncope
- ♥ Complete heart block following acute anterior or inferior wall myocardial infarction
- ♥ Partial A-V block (second degree block) complicating anterior wall myocardial infarction
- ♥ Post- surgical complete heart block

### REPERTORY OF ADAM- STOKES SYNDROME

Stokes-Adams Syndrome **Abies-n.** absin. **Acet-ac.** **Acetan.** achy. acon-c. acon-f. acon-l. **ACON.** aconin. **Adon.** adren. aesc. **Aeth.** aether agar-cps. agar-pa. agar-ph. **AGAR.** agn. ail. **All-c.** alum. alumn. **Am-c.** am-caust. am-n. ambr. aml-ns. ampe-qu. **Amyg.** **Anac-oc.** anac. **Anan.** androc. anh. anil. **Ant-ar.** ant-c. **Ant-t.** anthraci. **APIS** apoc. aran-ix. **ARG-N.** arge-och. **Arn.** **Ars-h.** **Ars-i.** ars-met. ars-s-f. **ARS.** **ART-V.** asaf. asc-c. asc-t. **Aspar.** **Aster.** atra-r. atro. aur-br. **Aur-i.** aur-m. aur. bacls-7. **Bapt.** bar-act. **Bar-c.** bar-i. bar-s. bell-p. **BELL.** ben-n. benz-ac. benzol. **BERB.** beryl. bit-ar. borx. both. bov. brom. **Bry.** **BUFO** buth-a. cact. cain. **Calc-ar.** calc-f. **Calc-p.** **Calc-s.** calc-sil. **CALC.** **CAMPH.** **CANN-I.** Cann-s. cann-xyz. **CANTH.** **Caps.** **Carb-ac.** carb-an. **CARB-V.** carbn-o. **CARBN-S.** carc. catal. **Caust.** celt. cench. cent. cham. **Chel.** **CHIN.** Chinin-ar. Chinin-s. chir-fl. chlf. chlol. chlor. chlorpr. chr-ac. **CIC.** cimic. cina cinch. cinnb. cit-l. cob-n. coc-c. coca **COCC.** coff-t. **Coffin.** colch. **Colchin.** coli. coll. coloc. **Com.** **Con.** **Conv.** cop. crat. croc. **Crot-c.** **Crot-h.** **Crot-t.** cryp. cub. cund. cupr-act. cupr-am-s. **Cupr-ar.** cupr-cy. cupr-s. **Cupr.** cur. cycl. cypr. cystein-l. cyt-l. daph. dat-f. delphin. **DIG.** digin. digox. dios. diph. diptox. dirc. dor. dub. dubo-m. **Dulc.** eberth. elat. enteroc. eryt-j. esin. euon. euph-c. euph-l. euph. euphr. eupi. fago. **Ferr-ar.** ferr-ma. **Ferr-p.** **FERR.** **Fl-ac.** **Gala.** galan. gast. **GELS.** gins. glon. glycyr-g. graph. grat. grin. ham. hell-o. **Hell.** helo-s. helo. **Helon.** hep. hippoz. hir. hist. home. **Hydr-ac.** **Hydr.** hydrog. **HYOS.** hypoth. ign. iod. **Ip.** iris jab. jac-c. jatr-c. juni-v. kali-ar. kali-bi. kali-br. **KALI-C.** kali-chl. kali-chr. kali-cy. kali-m. kali-n. kali-s. kali-sula. **KALM.** kola kou. **Kreos.** kres. **LACH.** lachn. lact. lat-k. lat-m. **Laur.** led. lept. lil-t. lith-c. lob-p. **Lob.** lol. lon-x. loxo-lae. loxo-recl. **Lup.** **LYC.** lycpr. **Lycps-v.** m-ambo. mag-c. **Mag-m.** mag-s. **Manc.** **Mang.** mec. **Med.** meny. meph. **Merc-c.** merc-cy. merc-n. merc-ns. merc-pr-a. merc-sul. **MERC.** meth-ae-ae. mez. morg-g. **Morph.** mosch. mur-ac. myric. **Naja** naphthoq. narc-ps. narcot. nat-ar. **Nat-c.** nat-f. **NAT-M.** nat-n. nat-pyru. **Nat-s.** nicot. nit-ac. nit-s-d. nitro-o. nux-m. **Nux-v.** **OENA.** ol-an. olib-sac. olnd. **OP.** **Ox-ac.** oxyurn-sc. ozone paeon. par. parathyr. pen. petr. **Ph-ac.** phel. **Phos.** phys. phyt. pic-ac. pip-n. pitu-gl. pitu-p. pitu. **PLAT.** **PLB.** **Podo.** prop. prun-p. prun. psor. **PULS.** pyrog. rad-br. ran-b. raph. rauw. reser. rhod. **RHUS-T.** ros-d. **Ruta** sabad. sabin. samars. samb. **Sang.** santin. sars. scam. **SEC.** sel. **Seneg.** **SEP.** ser-a-c. ser-ang. **Sil.** sol-ni. solin. spartin-s. spartin. **Spig.** spong. squil. **Stann.** staph. stigm. **STRAM.** streptoc. **Stront-c.** stroph-h. stroph-s. stry. succ. **Sul-ac.** sul-i. sulfa. sulo-ac. **SULPH.** sumb. syph. tab. tanac. **Tarax.** tarent-c. **Tarent.** tax. **Tela** tell. ter. teucr. thal-xyz. thea ther. thiop. thuj. thymol. thyr. til. toxo-g. trif-p. trios. tritic-vg. tub. upa. uran-n. uva valer. vanil. **VERAT-V.** **VERAT.** verb. vesp. vip. **VISC.** wies. wye. x-ray zinc-i. zinc-s. **Zinc.** zing.

CHEST - HEART failure - accompanied by - faintness **nux-m.**

CHEST - HEART failure - accompanied by - hypotension **elat.**

CHEST - HEART failure - accompanied by - pulse; soft **glon.**

CHEST - HEART failure - accompanied by - shock adren. carb-v. kali-c. lach.

CHEST - HEART failure - accompanied by - Valves; complaints of the **naja thyr.**

CHEST - HEART failure - accompanied by - weakness; general **adon.** am-c. ars.

CHEST - HEART failure - beginning of **cact.** **crat.** **nat-f.**

CHEST - HEART failure - Mitral valve **gala.** ser-ang.

CHEST - HEART failure - Ventricles - left **acon-f.** arn. **Coffin.** digox. gels. grin.

CHEST - HEART; complaints of the - Valves **acon.** **Adon.** apoc. **Ars-i.** **Ars.** aur-br. aur-i. aur. **Bar-c.** cact. calc-f. calc. camph. colch. **Conv.** **Crat.** **Dig.** ferr. galan. glon. iod. **Kali-c.** **Kalm.** lach. laur. lith-c. **Lycps-v.** naja ox-ac. phos. plb. **Puls.** rhus-t. sang. ser-ang. spartin. spig. spong. stigm. stroph-h. syph. tarent. thyr. visc. zinc-i.

CHEST - INFARCTION; myocardial **am-c.** ars. cimic. crot-h. hist. lach. lat-m. **Naja** parathyr. tab.

CHEST - INFLAMMATION - Heart - Myocardium **adon.** ant-ar. ars-i. crat. diph. diptox. eberth. **Gala.** iod. morg-g. streptoc. **toxo-g.**

CHEST - INFLAMMATION - Heart - Pericardium - chronic **apis Aur-i.** calc-f. kali-c. spig. squil. sulph.

CHEST - INFLAMMATION - Heart - Pericardium - rheumatic **acon.** anac. bry. colch. **Colchin.** crat. kalm. rhus-t. **Spig.**

CHEST - PALPITATION of heart - irregular alum. androc. apoc. arg-n. **ARS.** aur-m. aur. cact. **Chel.** chir-fl. **Cocc.** colch. conv. **Crat.** croc. **Dig.** glon. glycyr-g. hir. ign. iod. kali-c. kalm. kola lach. lil-t. loxo-lae. **Lyc.** lycps-v. **Mang.** merc. mosch. naja **NAT-M.** nit-ac. nux-v. olib-sac. **Ox-ac.** ozone parathyr. phos. ros-d. **Sang.** ser-ang. spartin. spig. spong. stram. streptoc. sulph. tarent. ther. toxo-g. tritic-vg. tub. vanil. visc. **Zinc.**

GENERALS - COLLAPSE - coldness; with camph. carb-v. **Verat.**

GENERALS - COLLAPSE - sudden **ARS.** **CAMPH.** chir-fl. **Colch.** crot-h. graph. hydr-ac. phos. sep.

GENERALS - COLLAPSE - tendency to **colch.** **coli.** pyrog. ser-a-c.

GENERALS - COLLAPSE acet-ac. acetan. acon. aconin. adren. aeth. agar-ph. **AM-C.** ampe-qu. amyg. **Ant-ar.** **Ant-t.** anthraci. apis aran-ix. arn. **Ars-h.** **ARS.** atra-r. **Bapt.** bar-c. beryl. borx. calc. **CAMPH.** cann-i. canth. **Carb-ac.** carb-an. **CARB-V.** **CARBN-S.** carc. caust. cench. **CHIN.** chir-fl. cina cit-l. **Colch.** colchin. coli. con. crat. **Crot-h.** crot-t. cupr-act. **Cupr-ar.** cupr-s. **Cupr.** cystein-l. cyt-l. **Dig.** diph. dor. euon. **Gels.** hell. home. **Hydr-ac.** hydrog. **Hyos.** iod. ip. jab. kali-br. kali-c. kali-chl. kali-chr. kali-cy. kali-n. kola kou. **Lach.** lat-m. **Laur.** lith-c. lob-p. lob. lol. lyc. **Med.** merc-c. merc-cy. merc-n. merc-ns. merc-pr-a. merc. morph. **Mosch.** mur-ac. naja nicot. nit-s-d. **Nux-v.** olnd. op. ox-ac. oxyurn-sc. ozone **Ph-ac.** **Phos.** phys. pitu-p. pitu. plb. rhus-t. sabad. santin. scam. **Sec.** sel. **Seneg.** sep. **Sil.** stram. **Stront-c.** succ. sul-ac. sulph. tab. tarent-c. tarent. tax. **Verat-v.** **Verat.** vip. **Zinc.**

GENERALS - CONVULSIONS - consciousness - without absin. acet-ac. acon. **Aeth.** agar. aml-ns. ant-t. **ARG-N.** arge-och. **Ars.** **ART-V.** **Aster.** aur. **Bell.** **BUFO** Calc-ar. Calc-p. Calc-s. **CALC.** Camph. **CANTH.** carb-ac. **Caust.** cham. chin. chlorpr. **CIC.** cina **Cocc.** crot-h. cupr-act. cupr-ar. **Cupr.** cur. dig. euph. ferr. gels. glon. hydr-ac. **HYOS.** hypoth. ign. ip. juni-v. **Kali-c.** lach. laur. led. lyc. merc. **Mosch.** nat-m. nit-ac. nux-m. nux-v. **OENA.** op. phos. **Plat.** sec. **Sep.** **Sil.** **Stann.** staph. **Stram.** **Sulph.** tanac. **Tarent.** thuj. verat. vesp. **VISC.** **Zinc.**

GENERALS - CONVULSIONS - epileptic - during epileptic convulsions; complaints - palpitation; irregular **calc-ar.**

GENERALS - FAINTNESS - palpitations - during **ACON.** **Am-c.** arg-n. beryl. cact. **Cham.** cimic. **Cocc.** crot-h. hydr-ac. **Hydr.** iod. **Kalm.** **LACH.** laur. lil-t. **Manc.** naja nat-m. **NUX-M.** petr. puls. sul-i. tab. ther. verat-v. **Verat.**

GENERALS - HEAT - flushes of - palpitations; with aml-ns. ant-c. arg-n. calc-ar. calc-f. Calc. coloc. glon. iod. KALI-C. lach. mosch. petr. puls. sep. sul-ac. sul-i. valer.

GENERALS - PULSE - slow - accompanied by - hypotension nat-pyru.

GENERALS - PULSE - slow Abies-n. acet-ac. Acetan. achy. acon-c. acon-f. acon-l. Acon. adon. adren. aesc. aeth. aether agar-cps. agar-pa. Agar. agn. All-c. alumn. am-caust. am-n. aml-ns. Amyg. Anacoc. anan. anh. anil. ant-c. Ant-t. apis apoc. arn. ars-met. ars-s-f. ars. asaf. asc-c. asc-t. Aspar. atra-r. atro. bacls-7. bapt. bar-act. bar-i. Bell. ben-n. benz-ac. benzol. BERB. bit-ar. both. brom. cact. cain. Camph. CANN-I. Cann-s. cann-xyz. Canth. Caps. carb-ac. carbn-o. carbn-s. catal. caust. cench. cent. Chel. chin. Chinin-s. chir-fl. chlf. chlol. chlor. chr-ac. cic. cimic. cinch. coca cocc. coff-t. colch. coli. coloc. Con. croc. Crot-h. cryp. cub. cund. cupr-am-s. cupr-cy. Cupr. cur. cyt-l. daph. dat-f. delphin. DIG. digin. digox. dios. dirc. dub. dubo-m. dulc. enteroc. eryt-j. esin. euph-c. euph. eupi. fago. ferr-ma. ferr. gast. GELS. gins. glon. glycyrr-g. grat. ham. hell-o. Hell. helo-s. helo. hep. hippoz. home. hydr-ac. hydr. hyos. ign. iod. iris jab. jac-c. jatr-c. juni-v. kali-bi. Kali-br. kali-c. kali-chl. kali-cy. kali-m. kali-n. kali-s. kali-sula. KALM. kou. kreos. kres. lach. lachn. lact. lat-k. lat-m. Laur. lept. Lob. lon-x. Lup. lycpr. Lycps-v. mag-c. Mag-m. mag-s. Manc. Mang. mec. meny. meph. merc-c. merc-cy. merc-sul. merc. meth-ae-ae. mez. Morph. mosch. mur-ac. myric. Naja naphthoq. narc-ps. narcot. nat-ar. nat-c. Nat-m. nat-n. nit-ac. nit-s-d. nitro-o. Nux-m. nux-v. oena. ol-an. olnd. OP. ox-ac. par. parathy. pen. petr. ph-ac. phel. phos. phys. phyt. pic-ac. pip-n. pitu-p. pitu. plb. Podo. prop. prun-p. prun. puls. ran-b. raph. rauw. rhod. rhus-t. ruta samars. samb. Sang. sars. Sec. SEP. sil. sol-ni. solin. spartin-s. spig. spong. squil. STRAM. stroph-s. stry. sulo-ac. sumb. Tab. tanac. Tarent. tax. Tela ter. thal-xyz. thea ther. thiop. thuj. thymol. trif-p. trios. upa. uva valer. VERAT-V. VERAT. verb. vip. visc. wies. wye. zinc. zing.

MIND - CONFUSION of mind - sleep - after ambr. anac. ars. bry. calc. carb-v. Con. dulc. graph. hep. lach. op. spong. squil. Sulph. uran-n.

SKIN - DISCOLORATION - pale Acet-ac. am-c. Anan. androc. Apis ars-s-f. Ars. atra-r. bar-c. bar-s. BELL. benz-ac. borx. calc-p. Calc-s. calc-sil. CALC. Carb-ac. carb-an. Carb-v. carc. caust. Chin. Chinin-ar. COCC. Con. crat. Cupr. Dig. diph. diptox. Ferr-ar. Ferr-p. FERR. Fl-ac. graph. Hell. Helon. ign. kali-ar. kali-br. Kali-c. Kreos. loxo-recl. LYC. mang. Merc-c. Merc. Nat-c. Nat-m. Nat-s. NIT-AC. Nux-v. olnd. op. ph-ac. Phos. PLAT. Plb. Podo. PULS. pyrog. sabin. sang. SEC. Sep. Sil. Spig. staph. Sul-ac. SULPH. sumb. syph. tab. thuj. tub. valer. VERAT. zinc-s. zinc.

SKIN - DISCOLORATION - red Acon. AGAR. agn. ail. Am-c. anh. ant-c. APIS Arn. bell-p. BELL. bov. Bry. bufo buth-a. calc-p. calc-sil. calc. camph. canth. caps. carb-v. celt. chin. chinin-s. cinnb. cob-n. cocc. coll. Com. con. cop. Crot-c. Crot-h. Crot-t. cub. cur. cycl. cypr. dig. Dulc. euph-l. euph. euphr. ferr-p. GRAPH. hist. hyos. ign. kreos. lach. led. Lyc. m-ambo. Manc. MERC. mez. nat-f. Nat-m. nit-ac. Nux-v. olnd. Op. paeon. petr. Ph-ac. Phos. phyt. pitu-gl. pitu-p. plb. psor. Puls. rad-br. rauw. RHUS-T. Ruta Sabad. sec. sep. sil. spong. squil. stann. STRAM. sul-ac. sulfra. Sulph. Tarax. tell. ter. teucr. til. toxo-g. tub. vesp. x-ray zinc. zing.

## BIBLIOGRAPHY



**Chapter 16. Syncope > Ambulatory Monitoring** Current Diagnosis & Treatment: Cardiology, 4e ...- Stokes attacks. Nonsustained ventricular tachycardia in patients with significant left ventricular dysfunction (ejection fraction < 40%) correlates with a risk of sudden death from sustained ventricular arrhythmias and warrants further electrophysiologic evaluation (see section on Invasive...)



**Chapter 16. Syncope > Bradyarrhythmias and Atrioventricular Block** Current Diagnosis & Treatment: Cardiology, 4e ... atrioventricular (AV) block. Syncope from Mobitz II second-degree AV block with paroxysms of several consecutive P waves that fail to conduct to the ventricle is called an Adams-Stokes attack. Medications can also cause syncope, and any patient with syncope from bradycardia must be thoroughly questioned...



**Chapter 16. Syncope > General Considerations** Current Diagnosis & Treatment: Cardiology, 4e ... emboli Pump failure (myocardial infarction or ischemia) Arrhythmias (decreased cardiac output) Bradyarrhythmias Sinus bradycardia Sick sinus syndrome Atrioventricular block (Adams-Stokes attacks) Pacemaker malfunction Drug-induced bradyarrhythmia...



**Chapter 18. Faintness and Syncope > Syncope of Cardiac Origin** Adams & Victor's Principles of neurology, 10e ... cardiac output and lead to syncope are to be found in the articles by Lipsitz , and by Kapoor and colleagues . Cardiac syncope occurs most frequently in patients with complete atrioventricular block and a heart rate of 40 beats or less per minute (Stokes-Adams attacks, or Adams-Stokes-Morgagni...)



Encyclopedia Homoeopathica



**Heart Blocks > Diagnosis** Resident Readiness®: Internal Medicine ... in the PR interval preceding conducted impulses. This type of AV block may progress rapidly to complete heart block, in which no escape rhythm may emerge. In this case, the person may experience a Stokes-Adams attack, cardiac arrest, or SCD. ...



Radar 10



**Syncope > Arrhythmias** Harrison's Principles of Internal Medicine ... of sufficient severity to cause syncope. Syncope due to bradycardia or asystole is referred to as a Stokes-Adams attack. Ventricular tachyarrhythmia's frequently cause syncope. The likelihood of syncope with ventricular tachycardia is in part dependent on the ventricular rate; rates below 200 beats/min...



**The Nervous System > Adams-Stokes syndrome** DeGowin's Diagnostic Examination, 10e



**The Nervous System > Syncope** DeGowin's Diagnostic Examination, 10e ... or examination direct you to a specific diagnosis [Kapoor WN. Syncope. N Engl J Med . 2000;343:1856-1862]. The most common cause of syncope is the vasovagal or vasodepressor faint. Other considerations are cardiac dysrhythmias (Adams-Stokes attacks—either tachy- or bradycardia), seizure, or autonomic...