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Aphorisms of hippocrates pdf

Comment: Several comments have been posted about aphorisms. Download: The text-only version is available for download. Aphorisms Hippocrates Written 400 B.C.E Translated by Francis Adams Content Section 1. 1. Life is short, and art long; crisis ephemeral; experience dangerous and make decisions difficult. The doctor must not only be prepared to do what is right himself, but also for the patient, attendant and external cooperate. 2. In the case of bowel disorders and vomiting occurring spontaneously, if the cleaned things are as they should be cleaned, they do good and are well tolerated; but if not, on the contrary. One, then, should look into the country, season, age and diseases in which they are correct or not. In athlete, embopoint, if carried to its highest limit, is dangerous because they can not remain in the same state, nor be stationary; and whereas, then, they cannot remain stationary or improve, they are left with only that to deteriorate; for these reasons, the embopoint should be reduced without delay so that the authority can resume reeration. Evacuations should not be taken to the extreme in their case, as this is also dangerous, but only to the extent that the Constitution of man endures. In a similar way, medicinal evacuations, if carried out to the extreme, are dangerous; and again, the restorative course, if in the extreme, is dangerous. 4. A lean limited diet is always dangerous in chronic diseases and also in acute diseases, where it is not necessary. And again, a diet brought to an extreme point of attenuation is dangerous; and exhaustion, when in the extreme, is also dangerous. 5. In a limited diet, patients who for the offense are therefore more injured (than with others?); for any such offense, whatever it is, there are greater consequences than in the diet a little more generous. For this reason, a very slim, regulated and limited diet is dangerous for people in health, because they tolerate it more severely. For this reason, a lean and limited diet is generally more dangerous than a little more liberal. 6. For extreme diseases, extreme methods of treatment are most appropriate when it comes to restriction. 7. When the disease is very acute, it is visited with extremely severe symptoms in the first stage; therefore an extremely attenuating diet must be used. If this is not the case, but it is permissible to provide a more generous diet, we can deviate from the severity of the regimen, since the disease is by its degree removed from the extreme. 8. When the disease is at its height, then you will need to use the most slimmed diet. 9. We need to make a specific judgement of the patient whether he will support the diet until the disease and whether it will sink before and promote diet, or the disease has been in the past, and become less acute. 10. In these cases, which quickly reach their acme, a limited diet should first be ensured; but in those cases that get to their acme later, we must in this period or a little before it misery; but before that, we need to allow a more generous diet to support the patient. 11. We need to retrench during paroxysms, for exposing food would be harmful. And for all diseases that have periodic paroxysms, we need to limit during paroxysms. 12. Exacerbations and remissions shall be indicated by diseases, seasons, retribution periods, whether they occur every day, every alternative day or after a prolonged period and symptoms of supervening; such as in pleuritic cases, drying, if it occurs at the beginning, shortens the attack, but if it appears later, prolongs the same thing; and in the same way urine, and alvine discharges, and sweating, depending on how they appear along with favorable or adverse symptoms, indicate diseases of short or long duration. 13. Old people endure fasting most commonly; adults; young people who are not nearly as well; and especially infants, and of them, such as a particularly living spirit. 14. Growing bodies have the most congenial heat; therefore require the most food, otherwise their bodies are wasted unnecessarily. In old people, the heat is weak and therefore require little fuel, as it were, to the flame, because it would have been extinguished a lot. Therefore, also fevers in old people are not as acute, because their bodies are cold. 15. In winter and spring the intestines are naturally the hottest, and sleep most prolonged; most nutrition is then to be administered during these seasons; as the abdomen then has the most innate heat, it stands in need of most foods. This is evidenced by known facts concerning young people and athletes. 16. Wet regimen is suitable for all febrile diseases, especially in children, and others accustomed to living on such a diet. 17. We must also consider in which cases food should be served once or twice a day and in greater or smaller quantities and at intervals. Something that must be an admitted habit, for the season, for the country, and for age. 18. The disabled carry the worst food during summer and autumn, most often in winter and spring next year. 19. Persons during periodic paroxysms, but abstract of the accustomed contribution before the crisis, nor to add anything to persons. 20. When things are in crisis, or when they have just passed, neither move the intestines nor any innovation in treatment, either when it comes to cleaners or any other such simulants, but not things at rest. 21. Those things that require evacuation should be evacuated, whatever they tend to be, from the right stores. 22. We need to cleanse and move such humors that are concocted, not as they are unse specified, if they try to out, which is usually not the case. 23. Evacuations should not be judged on their quantity, but on whether they should be what they should be and how they are tolerated. And when properly perform the evacuation deliquium animi, it could also be done, provided that the patient can support. 24. Use cleaning drugs sparingly in acute diseases and at the beginning, and not without proper caution. 25. If the matters being cleaned are those which should be cleaned, the evacuation is beneficial and easy to bear; but regardless, if not, with difficulty. Content Here we analyze Hippocratic aphorisms of nephrological interest, interpreting and speculation about their importance for our current knowledge. Although there are other similar works on various diseases, they rarely involve so many aphorisms referring to one specialty. We used a translation by the Scottish physician Francis Adams2Hippocrates: Aphorisms. Adams F, trans (1796-1861) and hippocrates' edition texts by a French doctor and lexicographer, Litre13Hippocrates: Aphorisms., volumes that have the same quote indexing, i.e. in sections and aphorisms. When we believed that some aphorisms might have a different meaning than that given in the Adams translation, we added an alternative meaning in brackets, leaving the text unchanged. We also compared our comments with those of previous ancient and Byzantine writers. We used Kühn's14In Hippocrates aphorism commentarii., 15In Hippocratis aforizmy commentarii. The 1965 edition of Galen is in Hippocratis Aforizmos Commentarii and the 1966 edition (Hakkert publishing) of the Treatise Commentarii in Hippocratis Aforizmo of the Byzantine medical writers Theophilus, Stephanus, a Damascius.16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis aphorismis. (Theophilus Protospatharius, approximately 7th century CE, was a physician in the yard of the Byzantine Emperor Heraclius; Stephanus, from Athens, was a 6th-century Byzantine doctor, and Damascius was a Byzantine doctor on 9 December 1999. Although they wrote comments on all aphorisms, we included only those that, in our opinion, further clarifies the meaning of each aphorism. Because some aphorisms include more than one category, they were arbitrarily classified by main theme, regardless of their sequence in the original text. [Section 4. Aphorism 69] When urine is dense, grumous, and disappearing in cases that are not without fever, abundant discharge of thinner urine proves beneficial. Such discharge is more often carried out when urine had sediment from the beginning or shortly after initiation. This could very well be a description of oliguric kidney failure complicating the febrile disease. A mizzling amount of urine that is dense and grumous (tromboodea, i.e., such as thrombus, dark forehead red, precipitating) can very well be the result of tubular necrosis, while the large amount of thin urine that follows, could represent lysis failure with the polyuric phase. [4.70] When in fevers urine is cloudy, such as the urine of the beast's load, in which case either there is or will be a headache. The urine of horses, asses and cattle is cloudy, probably due to the high concentration of phosphates they consume through their vegetative feeding. The ancients have noticed this as a difference compared to human urine, which is clear even if it is highly concentrated. This observation was reported initially in mesopotamian writings, then in ancient Greek writings, and later in Arabic medical files. The most likely explanation for the cloudy urine Hippocrates describes is either pyuria or cant organic or inorganic salts. Such a condition will eventually lead to an abnormal internal environment, and thus possibly a headache. In the case of macroscopic pyuria, one may indicate pyelonephritis; therefore, headaches. In the case of cloudy urine caused by proteinuria (macroscopic proteinuria, if such a term can be used), that is, massive proteinuria of the nephrotic scale. Such a condition will almost certainly be accompanied by activation of the renin-angiotensin system with salt retention, generalized edema and hypertension. Thus, either there is or will be a headache prediction also may be a sign of hypertension. [4.71] In cases that come into crisis on the seventh day, urine has red nubecula on the fourth day, and other symptoms accordingly. This is prognostic aphorism. Hematuria, which presents itself on the fourth day after the outbreak, is a sign of the severity of the disease, and aphorism predicts that the seventh day will be followed by a crisis. The crisis means the end of the disease, not the aggravation. Although it is not uncommon for transient haematuria to stop after a few days, we cannot give any meaning to the numbers 4 or 7 corresponding days. This numbering is a remnant of pre-socratic and pythagorean learning about the importance of numbers in medicine. It was based on mesopotoma and the Babylonian line of thought to link earthly phenomena with the phases of the moon. [4.72] When urine is transparent and white, it is bad; appears mainly in cases of frenitis. This could describe a patient with advanced renal failure. Transparent white urine could be a description of the impotence of chronic renal failure. Galen14In Hippocratis aphorismis commentarii. (p759line17) and Damascius16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis aphorismis. (p430line11) noted that frenitis was caused by the retention of toxic substances (yellow bile) that were not properly excreted in the urine, instead they accumulate in the brain and cause a symptom. We propose that this aphorism is applicable today, because if we replace yellow bile with uremic toxins, we have neurological signs of severe renal failure, i.e. uremic encephalopathy. [4.76] When small fleshy substances such as hairs are discharged together with dense urine, these substances come from the kidneys. This could be one of the first descriptions of blood castings. What is most impressive is Hippocrates' certainty that these substances come from the kidneys. Hippocrates was well aware of the complicated anatomy of the kidneys, although he could not explain their function. It clearly distinguished blood in the urine as a sign of bleeding, i.e. a ruptured blood vessel from the bladder or kidneys and fleshy substances derived from the kidneys. [4.77] In those cases where furfureous particles are discharged along with dense urine, then the bladder has scabies [is scabies]. Dense urine with furfureous particles probably describes cystitis with the excretion of squamous cells from the epithelium of the bladder. This could also be the case with cystitis with aggregates of white blood cells. The term scaunding is more descriptive than diagnostic. [7.31] When farinaceous sediment is in the urine during fever, this indicates a protracted disease. This is a description of cases of fever, which complicates either massive discharge of epithelial cells or pyuria. In both cases, the impairment of the kidneys, acute inflammatory condition or pyelonephritis, indeed, the case that would persist, taking into account hippocratic methods of treatment. [7.32] In those cases where urine is first thin and sediments become bilious, acute disease is indicated. Galen in his commentary15V Hippocratis aphorismis commentarii. (p122line1) clarified that Hippocrates means black, not yellow, bile. He then explained that this aphorism refers only to bile, not to locum, i.e. aphorism predicts the course of the disease, not the affected organ. Is it a description of acute tubular necrosis or post-infectious glomerulonephritis? If this aphorism is associated with the previous one, i.e. applies to patients with fever, this is likely to be an exacerbation of some chronic kidney diseases. Thin urine could be a description of the impotence of chronic disease. Although bilious in modern English would mean green, Hippocrates refers to bilious either yellow or black (i.e. very dark red). Assuming he means black bile, as Galen claims, this aphorism describes an acute exacerbation of chronic disease. [7.33] In those cases where urine is divided, there is a major disturbance in the body. This aphorism refers to urine with a large amount of sediment, so it appears to be divided into 2 parts, sediment and suspension. A large amount of sediment, whatever the cause may be, predisposes to a very serious condition. [7.34] When bubbles settle on the surface of the urine, they indicate kidney disease and that the complaint will be lengthy. Galen elaborated on this aphorism: Bubbles are created when liquids are stretched through the air. As this happens when the liquid contains something sticky. In this case, the bubbles do not easily break and become permanent. . . . 15V Hippocratis aphorism commentarii. (p134line12) This is the most commonly cited renal hippocratic aphorism and it could be one of the first descriptions of proteinuria. It is an increase in the surface tension of urine caused by proteins that produce this phenomenon. Unfortunately, aphorism does not give any details regarding the patient's condition, i.e. edem, weakness, headache (hypertension) and so on. [7.35] When scum on the surface is oily and abundant, it indicates acute kidney disease. As for this aphorism, previous commentators have stated that the presence of a gross amount of fat on the surface of urine indicates the breakdown of fat in the body in acute generalized diseases or perinephric fat in kidney diseases. This case has also been associated with cases of fatty faeces that have the same cause.18 Comments on treatise on urine: according to the wisest Nicéphorus Vlemmydes, Excellent medical work in the Iambic way, the smartest Pselius. This term persisted until the 19th century with the term lipurie.19Pathologie des reins, chapter: Lipurie. Although this aphorism provides insufficient detail to be sure, it could be a description of nephrotic-range nonspecific proteinuria with various proteins secreted, both fatty (lipoproteins) and abundant (in coarse amounts). [7.67] We need to look at the evacuation of urine to see if they resemble the evacuations of medical persons; if not at all, they are particularly morbid, but if they are like healthy persons, they are not morbid at all. This aphorism is a reminder to all doctors (and known to all nephrologists). Always look at the patient's urine. He recalls one of Sir Robert Hutchison's other aphorisms in the early 20th century asking 'why didn't you test my urine?' 20Hutchison is a clinical method. Hippocrates so much believed that urine testing was essential for diagnosis and prognosis that declared that if the urine of a sick person is normal, the prognosis is favorable. [4.75] Blood or pus in the urine indicates ulceration of either the kidneys or bladder. The English translator paid no attention to the grammar of the aphorism, did not pay attention to the difference between opper (uree; urination), indicating continuity, and oppon (ourese; urination), meaning only momentarily. A more accurate translation of this aphorism is: If [the patient] urinates [opper/uree] blood or pus, this means ulceration of the kidneys or bladder. Based on the use of continuous tension Theophilus claimed that aphorism does not apply to rupture of the abscess from an organ other than the liver into the urinary system, in which urination of blood and pus will not last long, maybe 2 or 3 days. Ask rhetorically And why didn't he mention ureter? Theophilus further explains that by mentioning the two ends included in the middle. Damascius added: Urination means many days. . . . For urination and urination are not the same. 16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis Aphorismis. (p432line28) It is interesting to notice the detail in which these commentators analyzed this aphorism, and its important message is the chronicity of the disease. [4.41] Abundant sweat after sleep occurring for no apparent reason indicates that the body uses too much food. But if it happens when a person doesn't take food, it means that an evacuation is needed. In this case, the skin is used as an alternative route to eliminate fluids in cases of excessive consumption of food. However, in cases where sweating is abundant without overindulgence, Hippocrates states that it is a sign of excess fluids that need to be removed through some treatment. This means that natural eliminating organs, kidneys and/or gastrointestinal tract are inoperable, unable to offer proper catharsis, and therefore some other kind of induced catharsis must be used. [4.74] When there is reason to expect an abscess to form in the joints, the abscess is carried away by a large outflow of urine, which is dense and becomes white, as what begins to form in certain cases of [quelling] quartan fever. It is also quickly carried away by nosebleeds. [If there is also nosebleeds, the lysis will come very quickly.] Here, Galen14In Hippocratis aphorismis commentarii. (p764line8) and Byzantine commentators16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis aphorismis. (p431line25) indicate that the substance accumulated in the joints can be removed in the urine and thus cured patients. What would be the trigger factor to expect an abscess to form in the joints? In an adult male, the driver is likely to be excessively intoxicated with food and wine in case of hyperuricemia. Hyperuricemia could form topthi, which resemble abscesses (gout), while polyuria with urine full of white material (phosphates or amorphous urate salts, although these are usually reddish brown) will gradually lead to lysis arthritis. However, aphorism does not indicate whether polyuria was spontaneous or should have been achieved by some medical intervention, such as water consumption or some medication.19Pathologie des reins, chapter: Lipurie. [4.78] In those cases where there is spontaneous discharge of bloody urine [... where bloody urine urine] indicates a rupture of a small vein in the kidneys. The keyword in this aphorism is spontaneous. Hippocrates apparently noticed some cases of hematuria that had no apparent cause. In other aphorisms, reference is made to haematuria as a result of some known or at least such as stone passage or trauma, systemic disease with fever or cancer. However, he realized that spontaneous hematuria could occur without obvious cause in an otherwise healthy person, and that is why he attributed this condition to the rupture of a small vein. Galen correctly elaborates that spontaneously can mean either no apparent external cause (i.e. trauma) or no preliminary symptoms (eg, bladder ulceration).14In Hippocratis aphorismis commentarii. (p774 line1) Theophilus once again reminds the reader of the grammar of aphorism, using the verb urination, not urinate, which means long duration sign.16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis aphorismis. (p437line8) suggested that the condition was due to reduced fluid excretion, which should have been in the urine, there is a calculus in the bladder. Sandy sediment in the urine could be calcium or urate salts. In both cases, the existence of calculus in the bladder and/or kidneys of such a patient is highly likely. [4.80] If the patient ingers blood and clots in the urine and has strangury, and if the pain catches the hypogastric region and perineum, the parts about the bladder are affected. [7.39] When the patient passes through blood and clots and is caught with strangury and pain in the perineum and pubic acids, bladder disease is indicated. These 2 diagnostic aphorisms are almost identical, with this aphorism 7.39 likely added later. Topographic localization and connection with anatomical structures gives a good idea of hippocratic knowledge of anatomy. [4.81] If the patient passes through blood, pus and scales in the urine and if he has a severe odor, bladder ulceration is indicated. Theophilus commented extensively on this aphorism, writing that it gives three facts, locus, constitution and malignancy of affection. Since the scales, which means the petal, indicates the affection of the bladder, pus and blood, indicates aeration; because there can not be pus in the urine without an ulcer; And a severe odor, meaning malodorous, indicates malignancy; for malodorous is a sign of sepsis and sepsis indicates malignancy.16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis Aphorismis. (p436line13) This aphorism probably describes a serious case of unattended infection of the urinary system. It also can be tuberculosis or cancer complicated by a common infection. The infection is probably in the bladder because the aphorism refers to the scales, which can mean the discharge of the epithelial cells of the bladder. [4.83] When a lot of urine is transferred during the night, this means a slight retreat of the disease. This appears to be a description of heart or kidney failure, in which the extravascular fluids are mobilized during the night, reflecting homeostatic changes associated with back positioning (eg, mobilization of peripheral edema) and subsequently eliminated by the kidneys with a false improvement in symptoms. Galen14In Hippocratis aphorismis commentarii. (p779line10) and Damascius16Theophilus Protospatharius, Stephanus, Damascius. Commentarii in Hippocratis aphorismis. (p437line8) suggested that the condition was due to reduced fluid excretion, which should have been excreted by the gastrointestinal system during the night, and therefore had to be excreted by the kidneys. [6.6] Kidney and bladder diseases are treated with difficulties in old men. Galen15In Hippocratis aphorism commentarii. (p11line8) states that the reason older people are treated with difficulties when they have diseases of the urinary tract is because they also have other diseases. In current medical aphorism, it is recognized that in older individuals, there is often more than 1 disease that explains the symptoms, while younger individuals usually have 1 unifying cause.23A Little Book of Doctors' Rules. The original aphorism acknowledged this and noted that the urogenital system was often affected. Diabetes, hypertension, heart failure, already impaired renal function, prostatic hypertrophy (in the men) and mild immunodeficiency make the treatment of kidney disease much more difficult in the elderly than in the young. That is why this aphorism is correct. [6.11] Hemorrhoids appearing in melancholic [those with increased black bile] and nephrotic affection are favourable. This is another aphorism that emphasizes the hippocratic belief that some diseases require a kind of catharsis to be cured. The occurrence of hemorrhoids with probable rupture and bleeding would provide some means of spontaneous catharsis. Needless to say, it would also lower blood pressure. [6.28] Eunuchs are not taken in or bald. [6.29] A woman does not take in if her menses are stopped. [6.30] A young man [a boy] doesn't take in while indulging in coition. Aphorisms 6.28, 6.29 and 6.30 deal with the same subject: the relationship between sex hormones and go bottom. We now know that testosterone levels increase the likelihood of both gout (and baldness) and that estrogens reduce the risk. The ratio of men to females of gourd in premenopausal women and men in a similar age group ranges from 7:1 to 9:1 and in men over 65 years of age it becomes 3:1. Even more impressive are Galen's comments. Galen added that not only the absence, but also irregularity, menses were associated with gouges in women, and even reported a rarity of cases of gouges in women with normal cycles.15In Hippocratis aphorism commentarii. (p431line15) in accordance with modern statistics.25Diamandopoulos A, Goudas P, Kassimatis T.L. Evidence-based early medicine: Evidence of statistical analysis in the Galen files. Crossref Scopus (3) Google Scholar These 3 are truly a triumph of personal experience. They managed to properly combine the signs reflecting the level of sex hormones with the bottom. [7.36] Whenever the above symptoms appear in jade diseases and with them acute back pain, provided that these sit on the outer parts, you can expect an abscess to occur; but if the pains are more about the inner parts, you may also prefer to expect that the abscess will sit internally. Unfortunately, aphorism does not indicate exactly which are the above symptoms. However, it is likely to apply to an abscess that causes pain radiating either internally or externally, in accordance with its location. Eknayan considers aphorisms 7.31 to 7.36 most likely as a description of postinfectious glomerulonephritis. [7.47] If the drip patient is apprehended the hiccup [cough] case is hopeless. For an unknown reason the English translator Adams translated the word cough as a hiccup. It is not excluded that adams' text had the word lyx in his hands, not a vyx, i.e. hiccup, not coughs. Support for the use of cough in this aphorism comes from comments Galen.15In Hippocratis aphorismis commentarii. (p153line4), as well as in littr translation of aphorisms, in which the word cough is used. If aphorism refers to hiccupps, it can be a case of end-stage renal failure or probably describes cases of chronic or stretched causes that cause pressure on the frenic nerve. In such cases of non-compensated indescribable ascites, either from the heart or liver failure, the emergence of hiccupps could be a serious sign. [7.81] For discharges through the bladder, abdomen and flesh [skin?] if the body deviates slightly from its natural state, the disease is mild; if there is much, it is great; if very much, it's fatal. This simple aphorism combines the severity of the sign with the course of the disease. Abnormal urine, faeces and sweat become prognostic tools compared to normal excrement.26Diamandopoulos A, Goudas P. Late Greco-Roman and Byzantine contribution to the development of laboratory examinations of body excrement Part 1: Urine, sperm, menses and faeces. Crossref PubMed Scopus (7) Google Scholar The more aberrations from normal, the worse the prognosis. [6.36] Venesection tests veneering: internal veins of the arm. This aphorism is based on the ancient belief that certain veins correspond to certain organs (Figure 3).27Bing over the centuries.. by cutting a certain vein, the competent organ would be reduced by excretion of extra or toxic fluids that accumulated in it. This theory was flawed and led to terrible cases of carnage, especially in the Middle Ages. However, we must not forget that, until the mid-20th century, we did not have the right to do so. des reins, chapter: Lipurie. It is still used in some parts of the world. The correct principle of this flawed practice was the removal of inflammatory toxins from the blood. In hippocrates' time, it has been searched for carnage, whereas nowadays, this is an attempt through dialysis. [7.29] When leukophlegmatia develops severe diarrhoea, the disease is eliminated. Figure 3 An illustration showing the points for venesection allegedly correlated with the pathology of internal organs. The 1528 edition of Hans von Gersdorff is the Feldbüch der Wundartzney [Fieldbook of Surgery], illustrator Johann Ulrich Wechtlin. Courtesy Medicine.By the term leukophlegmatia, Hippocrates lists a plethora of white mucus. 1 in 4 humors. In contemporary English, this could be interpreted as water overload and general edem. The term was created because of the white color of the skin in such patients. Severe diarrhea removes excess water, thus providing lysis of the disease. In this case, the intestine becomes the apparatus of will. [7.48] Strangury and veneer are treated by drinking pure wine [drunk] and by venesection; open the vein on the inside. Drinking pure wine is likely to have a mild analgesic, diuretic and antidepressant effect (the original Greek text uses the word drunkenness). As for the carnage that needs to be done from a certain vein, we have already mentioned in commenting on aphorism 6.36. [4.82] When tubers form in the urethra, if they are purulent and cracked, there is relief. Tubercles are probably tuberculous granulomates from urogenital tuberculosis or any other chronic infection. Placing them inside the urethra would cause pain, veneering and difficulty with emptiness. Undoubtedly, their evacuation deprives the patient. [2.10] The more you feed them, the more you get injured. This aphorism can also apply to kidney failure, as well as to the failure of other organs such as the liver or heart. In the case of kidney failure, a low-protein diet is the most advantageous; and it is interesting to note that the diet described for patients with chronic diseases in hippocratic writings were low protein diets. As a result, if the patient in kidney failure is not purified from their uremic toxins, the more we nourish them, the more we injure them. [4.2] When cleaning, we should take such things from the body, as it would be advantageous if he spontaneously left; but those of the opposite nature should be stopped. We believe that this aphorism is similar to the theoretical basis of dialysis. Perfect dialysis removes substances that would have been removed if the kidneys had not been damaged and prevented the loss of substances that would have saved the kidneys. [4.3] If the things that are cleaned are the things that should be cleaned, it is beneficial and well done; but if the opposite is the case, with difficulty. In this statement, which builds on the previous described, Hippocrates judges need to cure its result. If we remove unnecessary substances, the patient will improve and be satisfied with the treatment, but if we remove the necessary substances, the patient would hardly tolerate it. These 3 aphorisms for purge as a means of eliminating metabolic toxins may not be as alien to modern nephrology as they look. We're still trying to secrete some toxins in kidney failure through the gut. Current examples include the use of forging-exchange resins in patients with hyperkaemia or the use of phosphate binders in patients with hyperphosphataemia. hyperphosphemia.

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