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the 3 clinical phenotypes include asymptomatic symptomatic hypercalcemic and normocalcemic hyperparathyroidism importantly the severity of symptoms does not always correlate with calcium level and bone mass loss occurs with all forms of hyperparathyroidism including normocalcemic hyperparathyroidism 5 14 15

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updated recommendations in the guideline reflect recent evidence about hcm treatment and management including new forms of pharmacologic management like cardiac myosin inhibitors participation in vigorous recreational activities and competitive sports and risk stratification for sudden cardiac death scd

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the tempo 2 trial failed to show that intravenous tenecteplase improves outcomes and may result in harm during minor acute ischemic stroke patients with minor acute ischemic stroke were randomized to intravenous tenecteplase 0 25 mg kg n 432 vs standard therapy n 454 the primary outcome

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4602 background malignant pheochromocytomas and paragangliomas remain diseases that present those caring for patients with these diseases the dual challenges of hormonal excess and malignant behavior radiolabeled therapy with meta iodobenzguanine mibg and chemotherapy with a combination of cyclophosphamide vincristine and dacarbazine can

help in the management of patients whose disease

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antimicrobial therapy is a mainstay of the management for patients with acute cholangitis and or cholecystitis the tokyo

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