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Published in: **Vascular Health and Risk Management** · 2010

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Author: Eylem Levelt, Eylem Levelt, Gaurav S. G...

Publish Year: 2018

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Pathophysiology of Cardiomyopathies - ScienceDirect

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DCM is characterized by impaired left ventricular function. **Examination of the heart with DCM is representative of all disease states that cause DCM**. The characteristic decrease in the ventricular wall **thickness** masks the overall increase in left ventricular mass, due to **myocyte hypertrophy and**



Diabetic cardiomyopathy: Pathophysiology, theories and evidence to date



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Author: Eylem Levelt, Eylem Levelt, Gaurav S. G...

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Diabetic cardiomyopathy: Recent evidence from mouse models of type 1 and type 2 **diabetes** Article · Literature Review in Canadian Journal of Physiology and Pharmacology 82(10):813-23 · November ...

Author: David L. Severson

Diabetic cardiomyopathy

Diabetic cardiomyopathy is a disorder of the heart muscle in people with diabetes. It can lead to inability of the heart to circulate blood through the body effectively, a state known as heart failure, with accumulation of fluid in the lungs or legs. Most heart failure in people with diabetes results from coronary artery disease, and diabetic cardiomyopathy is only said to exist if there is no coronary artery disease to explain the heart muscle disorder.

Wikipedia

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Diabetic cardiomyopathy: Pathophysiology, theories and evidence to date

Athithan L *et al.* Diabetic cardiomyopathy

Lavanya Athithan, Gaurav S Gulsin, Gerald P McCann, Eylem Levelt

Abstract

The prevalence of type 2 diabetes (T2D) has increased worldwide and doubled over the last two decades. It features among the top 10 causes of mortality and morbidity in the world. Cardiovascular disease is the leading cause of complications in diabetes and within this, heart failure has been shown to be the leading cause of emergency admissions in the United Kingdom. There are many hypotheses and well-evidenced mechanisms by which diabetic cardiomyopathy as an entity develops. This review aims to give an overview of these mechanisms, with particular emphasis on metabolic inflexibility. T2D is associated with inefficient substrate utilisation, an inability to increase glucose metabolism and dependence on fatty acid oxidation within the diabetic heart resulting in mitochondrial uncoupling, glucotoxicity, lipotoxicity and initially subclinical cardiac dysfunction and finally in overt heart failure. The review also gives a concise update on developments within clinical imaging, specifically cardiac magnetic resonance studies to characterise and phenotype early cardiac dysfunction in T2D. A better understanding of the pathophysiology involved provides a platform for targeted therapy in diabetes to prevent the development of early heart failure with preserved ejection fraction.



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Oct 21, 2010 · However, **postmortem, experimental, and observational studies also provide evidence for a specific cardiomyopathy in diabetes, which may contribute to myocardial dysfunction in the absence of coronary artery atheroma.**² This is also sustained by the fact that patients with diabetes, independently of the severity of coronary artery disease, have increased risk of ...

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Author: Christina Voulgari, Dimitrios Papadogiann...

Publish Year: 2010

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Author: Eylem Levelt, Eylem Levelt, Gaurav S. G...

Publish Year: 2018

Pathophysiology of Cardiomyopathies - ScienceDirect

<https://www.sciencedirect.com/science/article/pii/B9780124052062000065>

The cardiomyopathies are a group of disorders that can be acquired or have a congenital basis. ² The different forms of **cardiomyopathy** exhibit **overlapping manifestations that may be a reflection of the limited number of adaptive changes the heart can withstand, including cardiac hypertrophy, necrosis and deposition with fibrosis, and metabolic derangements.** These

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