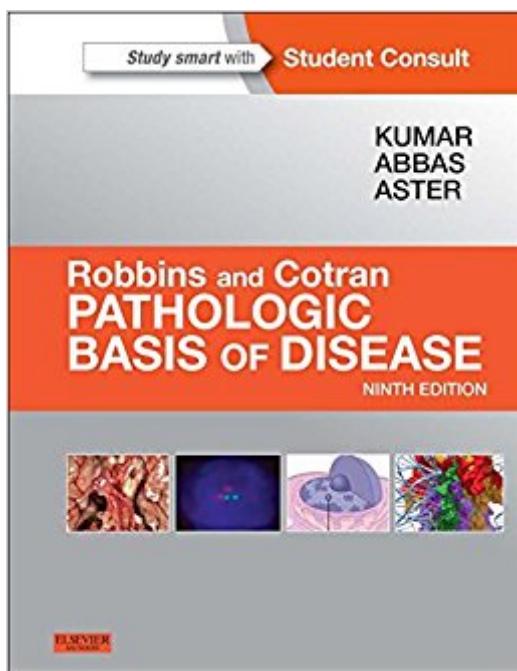


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Robbins & Cotran Pathologic Basis Of Disease E-Book (Robbins Pathology)



Synopsis

Dependable, current, and complete, Robbins and Cotran Pathologic Basis of Disease, 9th Edition is the perennially best-selling text that you'll use long after your medical student days are behind you. A world-class author team headed by Drs. Vinay Kumar, Abul Abbas, and Jon Aster, delivers the latest, most essential pathology knowledge in a readable, interesting manner, ensuring optimal understanding of the latest basic science and clinical content. High-quality photographs and full-color illustrations highlight new information in molecular biology, disease classifications, new drugs and drug therapies, and much more. Rely on uniquely authoritative and readable coverage, ideal for USMLE or specialty board preparation, as well as for course work. Simplify your study with an outstanding full-color, highly user-friendly design. Stay up to date with the latest information in molecular and genetic testing and mechanisms of disease. Consult new Targeted Therapy boxes online that discuss drug therapy for specific diseases. Gain a new perspective in key areas thanks to contributions from new authors at the top of their fields. Consult this title on your favorite e-reader, conduct rapid searches, and adjust font sizes for optimal readability.

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Customer Reviews

Errata will be updated if I find errors more. (Last updated: 3/26/2015)A conclusionThe renowned bible of pathology is revised enough to be sold under the title of "new edition." Students may stick to the previous edition (not so many changes to influence studying for the USMLE review). The new edition is more recommended unless you have got one. Though this book becomes easier and more student-friendly as new editions come out, students (including me) may still find the big Robbins difficult without a strong background of basic sciences. For the purpose of USMLE review, the baby Robbins is more than enough. However, I believe all doctors(-to-be), regardless of their specialties, should read this big Robbins at least once in their lifetime, not for the board review, but for a better understanding of medicine.Overall changes1. "Key Concepts" summary after each section, which may be useful to students.2. Some tables and figures are revised, most (but not all) of which are better than those from the previous edition.3. "References" Ã¢Â¢ "suggested readings." Updated, selected articles with useful comments (except in Ch26 & 28).4. A briefer, readable text with better editing. Many minor text revisions are geared toward pathogeneses and clinical features rather than morphologies. Frequent use of bullets and bold texts makes the contents clearer and easier to understand. Some of more impressive updatesCh1. A new chapter, parts of whose materials are assembled from several chapters of the previous edition. More coherent discussion of cell & molecular biology. Ch2. New pathways of cell death, necroptosis and pyroptosis. Updated discussions regarding autophagy. Minor text revisions. Ch3. The inflammation chapter and tissue repair chapter are combined. A newly written paragraph on neutrophil extracellular traps (NETs). Some primary immunodeficiencies (e.g., leukocyte adhesion deficiency) are moved to the Ch6, and stem cells, extracellular matrix or other stuffs are moved to the Ch1. Ch4. The coagulation cascade in vivo vs. in vitro. Minor text revisions. Ch5. A brief discussion regarding fragile X tremor/ataxia is added to the Fragile X syndrome section. Extensive revisions on "molecular diagnosis." A newly written section on next-generation sequencing (NGS). Several minor & major text revisions throughout the whole textbook accordingly. Ch6. Augmented discussion about innate immunity (e.g., TLRs, NOD-like receptors, inflammasome, etc.). New paragraphs concerning innate lymphoid cells (ILCs) and IgG4-related diseases. A new section on primary immunodeficiencies due to defects in innate immunity. A discussion of ataxia-telangiectasia in the context of immunodeficiency. Ch7. Extensive text revisions but following the similar outline as the 8th edition. Descriptions of several important topics (e.g., Hallmarks of cancer, Darwinian selection and

progression of tumor cells, oncogene addition and its therapeutic implications, the Warburg effect, cancer stem cells, molecular profiling of tumors, to name a few) are enhanced, while too detailed ones (e.g., the pocket protein family, etc.) are reduced or omitted. Overall, more organized and easier to understand.Ch8. "General principles" part is reorganized. Several minor text reinforcements that reflect recent advances regarding microbial pathogenic mechanisms. A new paragraph on *Cryptococcus gattii* is added.Ch9. Updated statistics and results from recent studies. A new paragraph on anticoagulants. Enhanced discussion of pathophysiology of obesity. Details regarding morphology of mechanical trauma are omitted.Ch10. No major changes here. Short additions about neuritogenesis and chromothripsis in neuroblastoma section. Minor text revisions.Ch11. Revised figure captions. Addition of brief paragraphs on various subjects (e.g., syphilitic aneurysm, aneurysm due to IgG4-related disease, Behcet Disease, myocardial vasospasm). Discussions on morphology of some vascular tumors are excluded.Ch12. A short passage about cardiac stem cells. A brief discussion of development of the interatrial septum. Several minor heart diseases are excluded (e.g., atrioventricular septal defect, persistent truncus arteriosus, total anomalous pulmonary venous connection, myocardial diseases associated with iron overload, hyper/hypothyroidism).Ch13. Paragraphs on hemophagocytic lymphohistiocytosis (HLH). A number of new molecular lesions in white cell neoplasms revealed by NGS and recent studies of epigenomics.Ch14. More detailed explanation of the survival benefit against malaria in patients with sickle cell traits. Revised explanation of coagulopathies that reflects coagulation cascade in vivo. A new section on complications of transfusion.Ch15. Paragraphs on pathogenesis of many respiratory disorders (e.g., acute lung injury, asthma, lung cancer, etc.) are rewritten or revised, many of whose details are dropped, but come to the point overall. Brief discussions of pulmonary Langerhans cell histiocytosis, lymphangioleiomyomatosis and surfactant dysfunction disorders are added. Other minor text revisions.Ch16. No major changes. Overall text length is cut down. A short paragraph on glossitis is deleted. Minor text revisions.Ch17. A short additional explanation on achalasia. Enhanced discussions of some topics (e.g., gastric injury & protection, molecular pathogenesis of GI tumors, pathogenesis of irritable bowel syndrome, etc.). Minor entities (e.g., uncommon esophageal tumors, Cowden syndrome, Bannayan-Ruvalcava-Riley syndrome, Cronkhite-Canada syndrome, peritoneal cysts) are removed.Ch18. An extensively reorganized introductory section with many additions and revisions on hepatocyte injury and repair, liver failure, and morphologies. Many other minor updated or revised sections throughout the whole chapter. Some witty mnemonics in "Key Concepts" summaries. Minor disease entities (e.g., hepatitis G virus, progressive familial intrahepatic cholestasis, Alagille syndrome) are discarded.Ch19. Rearrangements on the

pathogenesis of pancreatitis.Ch20. Recent concepts on the pathogenesis of glomerulonephritis due to circulating immune complexes. Several text updates reflecting current clinical viewpoints. A brief mention of Birt-Hogg-Dube syndrome and Xp11 translocation carcinoma. Overall text length is cut down by deleting redundant descriptions and minor entities.Ch21. Pathogenesis and clinical portion of prostate cancer are updated.Ch22. Some new figures. More abridged anatomy & embryology. Enhanced coverage on the pathogenesis of endometriosis, uterine fibroids, and ovarian tumors. Recent WHO classification of endometrial hyperplasia (from previously 4-tiered to 2-tiered). Vulvar malignant melanoma is deleted. Many minor text revisions.Ch23. "Breast cancer" section is revised extensively (statistics, pathogenesis, and morphologies according to the new classification scheme).Ch24. Updated diabetes subsection (separation of acute & chronic complications, an addition of "incretin effects," hexosamine pathways in the pathogenesis of chronic complications). Newly identified molecular lesion in pancreatic neuroendocrine tumors.Ch25. Text rearrangements to improve readability. Morphologic features of epithelial cysts are omitted.Ch26. Better summary paragraphs and tables. Parts of some arthropathies are curtailed. A small new section on undifferentiated pleomorphic sarcoma (UPS). Several entities (chondroblastoma and chondromyxoid fibroma, myositis ossificans, etc.) are out.Ch27. The anatomically rearranged chapter with many text revisions accordingly. A simplified approach to inherited peripheral neuropathies with detailed discussions being dropped. Several miscellaneous topics are added (e.g., Lyme disease, HIV/AIDS neuropathy, congenital myasthenic syndromes, rare musculodystrophies, etc.). Peripheral nerve sheath tumors are moved from Ch28.Ch28. Frontotemporal dementia ÁfÂ¢Ã Á Á™ frontotemporal lobar degeneration (FTLD). TDP-43 and C9orf72 in the pathogenesis of FTLD and amyotrophic lateral sclerosis (ALS). The enhanced paragraph on spinal muscular atrophy (SMA), which is mentioned independently of the SMA in Ch27. Updates on the pathogenesis of brain tumors and paraneoplastic syndromes. Some minor entities (e.g., Pelizaeus-Merzbacher disease, Alexander disease, vanishing white matter leukoencephalopathy, Kearn-Sayre syndrome, Alpers disease) are excluded.Ch29. The molecular pathogenesis of uveal melanoma. Errata (not meant to be complete; mostly editorial errors) (last updated: 3/26/2015)p. xvi Contents, Chapter 21: Incorrect page number. 859 ÁfÂ¢Ã Á Á™ 959p. 25 Right column, 3rd line: cyclin CDK4 and cycline CDK6 ÁfÂ¢Ã Á Á™ cyclin D-CDK4 and cyclin D-CDK6p. 49 Left column, 16th line: cross-lins ÁfÂ¢Ã Á Á™ cross-linksp. 55 Left column, 9th line: proteins This ÁfÂ¢Ã Á Á™ proteins. Thisp. 56 Left column, Figure 2-25 caption : FAAD ÁfÂ¢Ã Á Á™ FADDp. 58 Left column, 3rd line: Table 2-4). ÁfÂ¢Ã Á Á™ Table 2-4.p. 67 Left column, 4th line: a proteins ÁfÂ¢Ã Á Á™ proteinsp. 76 Table 3-3:

ÃƒÂ Ã Â 4ÃƒÂ Ã Â 7 (CD49DCD29) ÃƒÂ¢Ã Ã Â â™ÃƒÂ Ã Â 4ÃƒÂ Ã Â 7
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ÃƒÂ¢Ã Ã Â â™ FMRP-mRNAp. 171 Left column, 10th line: FRMP ÃƒÂ¢Ã Ã Â â™ FMRPp. 190
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bottom: How Microorganisms Cause Disease ÃƒÂ¢Ã Ã Â â™ Host Damagep. 353 Right column,
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ÃƒÂ¢Ã Ã Â â™ die.p. 387 Left column, 10th line, inflammation cause ÃƒÂ¢Ã Ã Â â™
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575 Right column, 14th line: Myxomas ÃƒÂ¢Ã Ã Â â™ Myxoma. Myxomas (for editorial
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punctuation)p. 584 Left column, 11th line: T cells-, lymphocytes ÃƒÂ¢Ã Ã Â â™ T cells,

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I should have bought this book sooner for my pathology class in med-school. Makes things much more clear when the instructor does a poor job of explaining things. The book is easy to follow, explains things clearly, has great pictures, and gives a summary/breakdown of key disease pathology with emphasis on Dx. All in all it works well and I can see myself using it for years to come.

If you're taking the pathology course at a medical school, I'd highly recommend this book. The diagrams and the way the information/content is organized is very logical and easy to follow. The wording of the sections are easy to read - not too much unnecessary jargon or complicated sentence structures.

Great for a reference but at the end of the day if your a med student just use Pathoma and you should be fine. Only use this if you have a solid understanding of path and really want to understand

it/have a desire for a path residency

This is THE pathologists handbook, and the go-to source for any points of confusion in your Med or Dental classes.

I bought this when I started graduate school in biomedical engineering. This is a fantastic foundational reference for anyone studying medicine. It doesn't go in depth on any particular disease, but it provides an excellent overview for a large range of diseases. It serves as a good starting point before going to literature to learn more about a given disease, and provides up-to-date literature reviews as sources.

Heavy duty book! It's perfect for reference book not as a main book for class.

Excellent resource. This was helpful at explaining concepts for my Pathophysiology classes during PA school.

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