jetke raste s porastom tlaka, raste s povećanjem veličine šupljine, a smanjuje se s porastom debljine klijetke. ***Grossman*** *i autori* smatraju da je otponac dilatacije klijetke u porastu enddijastoličkog wall stressa. Porasli enddijastolični wall stress oslobađa čimbenike u miokardu koji će stimulirati replikaciju i produživanje kontraktilnog materijala rezultirajući u proširenje šupljine. Porasli peak sistolic wall stress stimulira hipertrofiju paralelnom repliciranju kontraktilnog materijala u miocitima. To će sve imati za posljedicu da povećanjem šupljine srca raste i posljedični wall stress.

"I kao što pretpostavljamo da zrak poput stupa svojom težinom djeluje odozgo prema dolje, tako i kod tekućina moramo zamisliti stupove od dotične tekuće tvari, koji se, svaki pojedini svojom osnovicom opiru o jednake dijelove dna one posude koja tekućinu sadržava, i odozgo vrše pritisak, pa tako pritišće to dno te svojim jednakim djelovanjem između sebe tvore ravnotežu. A veće je djelovanje odozgo u smislu težine, koja je većas u dužem ili višem stupu negoli u kraćem ili nižem, uz pretpostavku da je riječ o istoj debljini.

Srce se kreće zbog zračenja koje mu šalje mozak, zbog zračenja i utjecaja koji dolaze iz glave kroz živce posredstvom živčane tekućine i titranjem čvrstog dijela ovojnice bez sudjelovanja tekućine."

Baglivi je bio svjestan teškog problema otkrivanja tajni zdravlja i bolesti i dugog puta znanstvenika do cilja.

"Kako smo to učinili do danas, do mjeseca listopada 1701. kada ovo pišemo, tako nećemo ni ubuduće prestati dok ovaj teški predmet posve ne obradimo. Ako se ovo nezadovoljnima ne sviđa dovoljno, izazov je svima pristupačan i ostavljena je prigoda da se učini bolje. Ako se sviđa dobrima i poštenima, to je nagrada koju želimo i za svoj napor.

Stoga neka bude tako!"

Problem ulaska u veliku tajnu rada srca i srčanih poremećaja nije ni danas, tristo godina poslije Baglivija, sasvim riješen. I put se nastavlja.

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geometry. Wall stress of the left ventricle increases with rising pressure, increases with an increase in the cavity size, and decreases with an increase in the ventricle thickness. ***Grossman*** *et al* consider that the trigger of the ventricle dilatation is in increase in the end-diastolic wall stress. The increased end-diastolic wall stress releases the factors in the myocardium which will stimulate the replication and extension of the contractile material resulting in the dilatation of the cavity. The increased peak systolic wall stress stimulates the hypertrophy to the parallel replication of the contractile material in myocytes. All this will result in causing increased consequential wall stress by enlargement of the heart cavity.

"And as we may presume that the air just like a column exerts force with its weight from the top downwards, so we must also imagine fluids like columns of the respective fluid, which each by itself presses against equal parts of the bottom of the container holding the liquid, exerting pressure from above, and pressing that base thus forming a balance with their equal interaction. Greater force is exerted from the top in terms of weight, which is greater in the longer or the taller column, than it is on the shorter or the lower column presuming that the same thickness is concerned.

The heart moves because of the radiation received from the brain, because of the radiation and influence received from the head through the nerves by nervous fluid and the oscillation of the solid part of the coat without the assistance of the fluid."

Baglivi was aware of a difficult problem related with revealing the secrets of health and disease and a long journey to reach the scientific target.

"As we learned it until today, until October 1701 as we are writing this, so shall we not stop in the future until we completely solve this difficult case. If this is not to the liking of the dissatisfied, the challenge is accessible to everyone and opportunity to do ones best is given. If it is to the liking of good and honest, it is the reward we seek for our toils.

So be it!"

The problem of disclosing the big secret of the heart functioning and heart disorders has still not been solved today, three hundred years after Baglivi. So the journey continues.

Literature

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Vijesti

Simpozij "Bolesti srčanih valvula" Zagreb, 20. veljače 2009.

Hrvatski liječnički zbor, Hrvatsko kardiološko društvo (Radna skupina za bolesti valvula) i Hrvatsko društvo za kardiotorakalnu kirurgiju i anesteziologiju organiziraju Simpozij BOLESTI SRČANIH VALVULA koji će se održati 20. veljače u prostorijama Hrvatskog liječničkog zbora, u Šubićevoj 9 u Zagrebu, s početkom u 9:30 sati. Program simpozija i pristupnicu možete preuzeti na www.kardio.hr.

News

Symposium "Heart Valve Diseases" Zagreb, 20th February 2009

Croatian Medical Association, Croatian Cardiac Society (Task Force for valve diseases) and Croatian Cardiothoracic Surgery and Anesthesiology Society organize a Symposium "HEART VALVE DISEASES" to be held on 20th February in the premises of the Croatian Medical Association, at Šubićeva 9 in Zagreb, commencing at 9:30 o'clock. More info at www.kardio.hr.