There are many reasons why a cookie could not be set correctly. Below are the most common reasons:

- You have cookies disabled in your browser. You need to reset your browser to accept cookies or to ask you if you want to accept cookies.
- Your browser asks you whether you want to accept cookies and you declined. To accept cookies from this site, use the Back button and accept the cookie.
- Your browser does not support cookies. Try a different browser if you suspect this.
- The date on your computer is in the past. If your computer's clock shows a date before 1 Jan 1970, the browser will automatically forget the cookie. To fix this, set the correct time and date on your computer.
- You have installed an application that monitors or blocks cookies from being set. You must disable the application while logging in or check with your system administrator.

Why Does this Site Require Cookies?

This site uses cookies to improve performance by remembering that you are logged in when you go from page to page. To provide access without cookies would require the site to create a new session for every page you visit, which slows the system down to an unacceptable level.

What Gets Stored in a Cookie?

This site stores nothing other than an automatically generated session ID in the cookie; no other information is captured.

In general, only the information that you provide, or the choices you make while visiting a web site, can be stored in a cookie. For example, the site cannot determine your email name unless you choose to type it. Allowing a website to create a cookie does not give that or any other site access to the rest of your computer, and only the site that created the cookie can read it.

If pulmonary hypertension progressed into pulmonary hypertension with right-sided heart failure, characteristic physical signs can be detected by examination: Inspection: Prominent A wave may be seen when assessing jugular venous pulsation (JVP). It may show enlargement of the right atrium and ventricle with a thickened interventricular septum, with a reduction in left ventricular (LV) cavity size. Echo can reveal the tricuspid regurgitant jet that can be used to estimate right ventricle (RV) systolic pressure by Doppler. Right ventricular pressure overload may result in abnormal septal motion. Pulmonary arterial hypertension in adult patients with congenital heart disease is a heterogeneous condition caused by pulmonary vascular disease, pulmonary vasoconstriction or by overcirculation. These pathophysiologies may occur in isolation or in combination. The most common form is seen in patients with unrepaired large shunts.

Learn about pulmonary hypertension (high blood pressure in the lungs) from Cleveland Clinic experts. Read more about symptoms, causes, diagnosis and treatments. Pulmonary hypertension is when the blood pressure in the arteries of the lungs becomes abnormally high due to narrowing of the vessels. This strains the right ventricle of the heart and could lead to heart failure.