

1. Record Nr.	UNINA9910551824503321
Titolo	Endocrinology and diabetes : a problem-oriented approach / / edited by Francisco Bandeira, [and three others]
Pubbl/distr/stampa	Cham, Switzerland : , : Springer, , [2022] ©2022
ISBN	3-030-90684-1
Edizione	[2nd ed.]
Descrizione fisica	1 online resource (487 pages)
Disciplina	616.462
Soggetti	Endocrinology
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	Intro -- Preface to Second Edition -- Contents -- Contributors -- Part I: Endocrinology -- 1: Hyperthyroidism and Thyrotoxicosis -- Introduction -- Presentation of Thyrotoxicosis State -- Clinical Presentations of Thyrotoxicosis Mimicking Other Conditions -- Thyrotoxicosis Syndromes (Table 1.1) -- Hyperthyroidism Associated with High Thyroid RAIU [5] -- Hyperthyroidism Associated with Normal RAIU -- Thyrotoxicosis Associated with Very Low or Near-Zero (Table 1.2) Neck RAIU [2, 5] -- Thyrotoxicosis with Low Thyroid RAIU and Low Serum Thyroglobulin -- Thyrotoxicosis Presenting with Neck Pain -- Drug-Induced Thyrotoxicosis and Hyperthyroidism -- Amiodarone-Induced Thyrotoxicosis -- Subclinical Hyperthyroidism -- Hyperthyroidism Associated with Pregnancy -- Fetal and Neonatal Hyperthyroidism -- Hyperthyroidism in Pediatric Age Group -- Hyperthyroidism in Trophoblastic Disease -- Hyperthyroidism with Inappropriately Normal Serum TSH in TSH-Producing Pituitary Adenoma -- Hyperthyroidism in Thyroid Hormone Resistance -- Thyrotoxicosis Associated with "Café au Lait" Pigmentation and Fibrous Dysplasia (McCune-Albright Syndrome) -- Non-autoimmune Hyperthyroidism Caused by Genetic Mutation of TSH Receptor -- Metastatic Follicular Cancer and Hyperthyroidism -- Hyperthyroidism Associated with Normal T4 but Elevated T3 (T3 Toxicosis) -- Laboratory Investigation of Thyrotoxicosis and Hyperthyroidism -- Management of Thyrotoxicosis and Hyperthyroidism -- Management

of Graves' Hyperthyroidism -- Pros and Cons of Antithyroid Therapy -- How to Manage Recurrence of Hyperthyroidism After 18 Months of Antithyroid Therapy? -- Radioactive Iodine Therapy (RAI) for Graves' Hyperthyroidism -- Management Before and Immediately After RAI Therapy -- Surgical Management of Graves' Hyperthyroidism -- Preparing Patients with Graves' Hyperthyroidism for Surgery. Management of Severe Hyperthyroidism and Thyroid Storm -- Management of Toxic Adenoma and Toxic Multinodular Goiter -- Management of Hyperthyroidism Associated with Ophthalmopathy and Thyroid Dermopathy -- Conclusions -- References -- 2: Hypothyroidism -- Introduction -- Epidemiology -- Clinical Presentation and Physical Examination -- Etiology -- Primary Hypothyroidism -- Medication-Induced Thyroid Dysfunction -- Central (Secondary and Tertiary) Hypothyroidism -- Generalized Thyroid Hormone Resistance -- Evaluation -- Treatment -- Therapeutic Target -- Persistent Complaints Despite Normal TSH -- Combination Therapy -- Special Populations -- Subclinical Hypothyroidism (SCH) -- Hypothyroidism and Pregnancy -- Myxedema Coma -- References -- 3: Thyroid Nodules and Cancer -- Introduction and Clinical Importance -- History and Physical Examination -- Diagnostic Evaluation -- Serum Markers -- Thyroid Ultrasound and Indication for Fine-Needle Aspiration (FNA) -- Other Imaging -- Cytology -- Management, Therapy, and Follow-Up -- Benign Thyroid Nodule -- Malignant Thyroid Nodule -- Suspicious for Malignancy -- Indeterminate Thyroid Nodule (AUS/FLUS and FN/SFN) -- Non-diagnostic -- Special Situations -- Thyroid Nodule During Pregnancy -- Thyroid Nodules in Children -- Thyroid Cancer -- American Thyroid Association Risk Stratification System -- ATA Low Risk -- ATA Intermediate Risk -- ATA High Risk -- Summary -- Appendix -- References -- 4: Evaluation of Sellar Masses -- Introduction -- Key Points to the Diagnosis -- Radiologic Findings -- History, Physical Examination, and Laboratory Findings -- Evaluation of the Incidentally Found Pituitary Mass -- Differential Diagnosis -- Present and Future Therapies -- Transsphenoidal Surgery -- Radiation -- Medical Therapy -- References -- 5: Hyperprolactinemia -- Pathophysiology -- Key Points for Diagnosis. Differential Diagnosis -- Current Therapies and Future Perspectives -- Medical Treatment -- Surgical Treatment -- Radiotherapy -- Fertility and Pregnancy -- Addressing Prolactinomas Resistant and/or Aggressive -- Summary: Diagnosis and Treatment -- References -- 6: Acromegaly -- Epidemiology -- Etiology -- Pathophysiology -- Clinical Features -- Cardiovascular System -- Endocrine and Metabolic Features -- Musculoskeletal Features -- Neoplastic Features -- Respiratory System -- Diagnosis -- Treatment -- Transsphenoidal Surgery -- Medical Treatment -- Somatostatin Analogues -- Dopaminergic Agonists -- GH Receptor Antagonists -- Combination Therapy -- Radiotherapy -- Treatment in Pregnancy -- Pasireotide LAR -- Somatotropin -- Subcutaneous Octreotide -- Oral Octreotide -- Temozolomide -- References -- 7: Hypopituitarism -- Causes -- Diagnosis -- Clinical Presentation -- Somatotropin Deficiency -- Children -- Adults -- Gonadotropin Deficiency -- Thyrotropin Deficiency -- Corticotropin Deficiency -- Antidiuretic Hormone (ADH) Deficiency -- Diagnostic Testing -- Somatotropin Deficiency -- Children -- GH Stimulation Testing in Children -- Adults -- GH Stimulation Testing in Adults -- Transitional Period -- Gonadotropin Deficiency -- Thyrotropin Deficiency -- Corticotropin Deficiency -- ADH Deficiency -- Imaging -- Neuro-ophthalmic Exam -- Management -- Hormone Replacement Therapy -- Hyposomatotropism -- Children -- Adults -- Transitional Period -- Hypogonadism (in the Adult Female)

-- Pubertal Development -- Fertility Treatment -- Hypogonadism (in the Adult Male) -- Oral Testosterone -- Intramuscular Depot -- Transdermal Systems -- Buccal Tablet -- Pellets -- Other -- Monitoring During Androgen Therapy -- Infants/Pubertal Development -- Fertility Treatment -- Thyrotropin Deficiency -- ACTH Deficiency -- ADH Deficiency.

Hormone Replacement Therapy Interactions -- Long-Term Management -- Potential Future Therapy -- References -- 8: Cushing's Syndrome -- Introduction -- Aetiology -- Epidemiology -- Key Points to the Diagnosis and to the Differential Diagnosis (Fig. 8.1) -- Present and Future Therapies (Fig. 8.2) -- Conclusions -- References -- 9: Adrenal Failure -- Introduction -- Presentation of Adrenal Insufficiency -- Biochemical Findings in Adrenal Insufficiency -- Pathophysiology -- Diagnostic Tests (Tables 9.2 and 9.3) [12] -- Investigations to Establish the Underlying Cause of Adrenal Insufficiency -- Other Investigations -- Differential Diagnosis -- Treatment -- Management of Adrenal Crisis -- Management of Chronic or Insidious Onset of Adrenal Insufficiency -- Glucocorticoid Replacements -- Mineralocorticoid Replacement -- DHEA Replacement [17] -- Modified Release Hydrocortisone -- Follow-Up -- Assess Glucocorticoid Replacement -- Assess Mineralocorticoid Replacement -- Patient Education -- References -- 10: Adrenal Incidentalomas -- Epidemiology -- Imaging Procedures -- Fine Needle Aspiration (FNA) -- Hormonal Evaluation -- Patient Follow-Up -- Treatment -- References -- 11: Endocrine Hypertension -- Introduction -- Primary Aldosteronism -- Etiology -- Clinical Presentation -- Diagnosis -- Screening -- Confirmatory Tests -- Imaging Tests -- Adrenal Vein Sampling -- Postural Test -- Genetic Tests -- Treatment -- Pheochromocytoma and Paraganglioma -- Epidemiology and Pathophysiology -- Clinical Presentation -- Laboratory Tests -- Imaging Tests -- Genetic Tests -- Treatment -- Preoperative Clinical Management -- Perioperative Management -- Follow-Up -- Treatment of Malignant Pheochromocytoma -- References -- 12: Hirsutism and Virilization -- Epidemiology of Hirsutism and Virilization -- Etiology of Hirsutism and Virilization. Pathophysiology of Hirsutism and Virilization -- Key Points to the Diagnosis of Hirsutism and Virilization -- Physical Examination -- Hormone Profile -- Genetic Analysis -- Differential Diagnosis -- Management of Hirsutism and of Virilization -- References -- 13: Menopause -- Epidemiology -- Clinical Manifestations -- Diagnosis -- Hormone Therapy -- Vasomotor Symptoms -- Genitourinary Tract -- Sexual Function -- Quality of Life -- Osteoporosis -- Cardiovascular Effect -- Diabetes Mellitus -- Endometrial Cancer -- Breast Cancer -- Ovarian Cancer -- Cognition and Dementia -- Principles of Treatment -- Patient Selection -- Preparations -- Dose and Route of Administration -- Duration of Treatment -- Discontinuation of Treatment -- Complementary and Alternative Therapies -- Nonhormonal Therapy for Vasomotor Symptoms -- Other Hormone Therapies -- Phytohormones -- Botanicals -- Tibolone -- Ospemifene -- Others -- The Future -- References -- 14: Male Hypogonadism -- Pathophysiology -- Causes of Hypogonadism -- Primary Hypogonadism (Hypergonadotropic) -- Congenital Causes -- Klinefelter Syndrome -- Other Chromosomal Abnormalities -- Disorders of Androgen Synthesis -- Mutation in FSH and LH Genes -- Cryptorchidism -- Congenital Anorchia -- Acquired Causes -- Varicocele -- Orchitis -- Chronic Diseases -- HIV Infection -- Irradiation -- Gonadal Toxicity of Cancer Chemotherapy -- Trauma and Torsion of Testes -- Medications -- Autoimmune Testicular Failure -- Secondary Hypogonadism (Hypogonadotropic) -- Congenital Causes

-- Isolated Hypogonadotropic Hypogonadism -- Kallmann Syndrome
-- Laurence-Moon and Bardet-Biedl Syndrome -- Deficiencies
of Transcription Factors -- Acquired Causes -- Disorders
of Gonadotropin Secretion -- Hyperprolactinemia -- Drugs -- Chronic
Diseases -- Critical Conditions -- Anorexia Nervosa -- Diabetes
Mellitus -- Obesity.
Disorders of Direct Gonadotroph.
