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The Molecular Biology and Pathology of Acromegaly -- Growth Hormone-releasing Hormone Secreting Neuroendocrine Tumors -- Diagnosis of Acromegaly -- Imaging in Acromegaly -- The Clinical Presentation of Acromegaly -- Sleep-Disordered Breathing in Acromegaly -- Cardiovascular Pathology in Acromegaly -- Diabetes and Acromegaly -- Musculoskeletal Disorders of Acromegaly -- Acromegaly and Cancer -- Mortality in Acromegaly -- An Overview to the Approach to the Management of Acromegaly -- Transsphenoidal Surgery for Acromegaly -- Stereotactic Radiosurgery and Radiation Therapy for Acromegaly -- Challenging Questions in the Management of Acromegaly in the Young -- Somatostatin Analogues in the Management of patients with Acromegaly -- Use of Dopamine Agonists for Acromegaly -- Pegvisomant: Lessons Learned After 20 Years and Practical Recommendations of its use for the Treatment of Acromegaly -- Perspectives on Combination Medical Therapy in the Treatment of Acromegaly -- Long-term Follow-up of Patients with Acromegaly -- A Patient's Perspective on Acromegaly.

Reviewing the most current literature, this text is a guide to medical decision-making regarding the diagnosis and treatment of patients with acromegaly. The scope of the book is comprehensive, covering all relevant facets of acromegaly, beginning with a history of the disorder and a review of the somatotrophic axis. Etiology is then discussed, including growth hormone secreting pituitary adenomas and other neuroendocrine tumors. Subsequent chapters present imaging modalities and diagnosis via radiology and clinical findings, as well as comorbid symptoms such as sleep apnea, musculoskeletal considerations, cardiovascular disorders, cancer and diabetes. Both medical and surgical management chapters describe each in detail, including radiotherapy, transsphenoidal surgery, somatostatin analogues and dopamine agonists. Concluding chapters present long-term follow-up as well as an extended selected patient story detailing life with the disease. Bringing together the latest in endocrinologic and neurosurgical evidence and practice, Acromegaly will be the go-to resource for this challenging condition for years to come. .