



## Book Review

**Endocrine hypertension: From basic science to clinical practice, 1<sup>st</sup> Edition.** J. M. Pappachan & C. J. Fernandez, Editors (Academic Press, Cambridge, MA, USA) 2022. 410 pages. Price: Not mentioned

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Non-communicable diseases currently account for the majority of deaths worldwide, especially in low- and middle-income countries, where access to healthcare and preventive measures are limited. Hypertension has long been considered the domain of a cardiologist; a chronic progressive disease with adverse cardiovascular consequences, is considered a penalty for inappropriate lifestyle and non-modifiable genetic factors. Unknown to many is the entity of endocrine hypertension – hypertension caused by hormonal imbalances in the body. The hormonal imbalances may also have a direct detrimental effect on cardiovascular outcomes. Contrary to popular belief, endocrine hypertension is often reversible, if detected timely, thereby mitigating the long term adverse outcomes.

This book is a brilliant initiative in creating awareness about the lesser known aspects of hypertension – that the underlying causes are often modifiable and reversible.

This book has 21 chapters. The first 3 chapters give a quick overview of the various endocrine causes of hypertension and the hormonal regulators of blood pressure. Chapters 4 and 5 deal with the hypothalamic-pituitary-adrenal axis and the renin-angiotensin-aldosterone systems that influence these hormonal regulators of blood pressure. These chapters highlight the neuroendocrine circuits controlling adaptive stress response and the peripheral regulators of vascular tone and blood volume and the effect of antihypertensive medications on these systems.

The chapter on monogenic hypertension (Chapter 6) contains lucid illustrations of the cellular

and physiological mechanisms responsible for the pathogenesis of hypertension in these disorders. Primary aldosteronism is comprehensively covered with regard to the evaluation, detection, and treatment of the disorder. The subsequent chapter deals with the familial form of this disorder and provides clarity regarding the treatment of the same. The topic is further covered, along with other causes of familial hypertension, in Chapter 10. The book also discusses the rare entity of congenital adrenal hyperplasia (CAH), with the two hypertensive variants discussed in detail. A mention is also made about the genetics of this disease.

Chapters 11-16 deal with specific endocrine disorders and their role in hypertension. These chapters provide clarity on how to suspect, when to screen and how to confirm and treat these specific disorders. Chapter 17 is dedicated to obesity and obstructive sleep apnoea in the pathogenesis of hypertension.

Endocrine hypertension in children (Chapter 18) and pregnancy (Chapter 19) are areas of special concern regarding an endocrinologist. These areas have been covered with exceptional clarity. The chapter on pregnancy also mentions the diagnostic cutoffs, imaging techniques and treatment options that are unique to this critical time period.

Chapter 20 has been dedicated to imaging techniques in a patient suspected to have endocrinological causes of hypertension. This is essential, as a physician involved in the care of these individuals cannot be ignorant of the radiological aspects of the disease. The final chapter is a fitting concise overview of the book, providing a systematic approach to the evaluation and management of these disorders.

Overall, the book is informative and well written, with contents summarised beautifully with the help

of graphical abstracts. It could have been more concise and slightly more precise in some places. For instance, the topics of familial hyperaldosteronism have been discussed in two chapters and the inclusion of genetics in CAH where hypertension is not a manifestation may have been unnecessary. Similarly, in hypertension in pregnancy, including cut-offs for plasma fractionated metanephrines in the diagnosis of pheochromocytoma and more detail regarding the diagnosis of acromegaly would have been useful for clinical practice.

This book would be valuable for not just endocrinologists but for any clinical practitioner involved in patient care.

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