

## PITUITARY TUMOURS, EPIDEMIOLOGY, PATHOGENESIS AND MANAGEMENT\*

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The management of pituitary tumours has advanced considerably over the last decade. A variety of novel dopamine agonists has revolutionised the management of prolactinomas, while the availability of effective somatostatin analogues has raised the possibility of primary medical treatment of acromegaly. Furthermore, the syndrome of adult growth hormone deficiency has been characterised and is thought to explain the twofold increase in mortality of patients with hypopituitarism on full replacement, which conventionally excludes growth hormone. This volume, outlining the conference proceedings of a group monitoring the long-term efficacy and safety of growth hormone replacement therapy, therefore appears at an opportune moment.

The work is a veritable pituitary pot pourri, with contributions from many recognised experts in the field. Much discussion centres on the syndrome of adult GH deficiency, comprising loss of muscle and increased adiposity, accelerated atherosclerosis and impaired emotional well-being, which is not only virtually universal in patients with significant hypopituitarism, but is also effectively treated by GH replacement. Other contributions describe the prevalence and natural history of pituitary tumours and sit somewhat uneasily alongside discussions of transgenic mouse models of pituitary tumours. This diversity in a relatively slim volume is both a strength and weakness – pituitary *aficionados* will find much to tantalise as the authors successfully highlight several areas of controversy. Those less familiar with the field would, however, have more success consulting Melmed's *The Pituitary* or the relevant issues of Bailliere's *Clinical Endocrinology and Metabolism* for a more comprehensive review of pituitary disease.

In short, the volume would be a useful addition to the endocrinologist's bookshelf, and should be available in a medical library, but cannot be strongly recommended for those with no more than a passing interest in pituitary disease.

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