HYPERALDOSTERONISM

(Aldosteronism; Conn's Syndrome)

NOLENSVILLE FAMILY MEDICINE
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BASIC INFORMATION

DESCRIPTION

An endocrine disease caused by too much aldosterone, a hormone made by the adrenal gland. Excess aldosterone causes the kidneys to take in too much sodium and water, and eliminate too much potassium. It can affect both sexes (females more than males) and is more common in adults between ages 30 and 50.

FREQUENT SIGNS AND SYMPTOMS

- Fatigue and weakness.
- Temporary paralysis (sometimes).
- Tingling sensations in the arms, legs, hands, and feet.
- Urinary frequency, especially at night.
- Thirst.
- Severe muscle spasms.
- Vision problems.

The following may show up in medical tests:

- Low blood levels of potassium.
- High blood levels of sodium.
- High blood pressure.

CAUSES

- It involves the adrenal glands, which are attached to the upper part of the kidneys. The increased adrenal secretion of aldosterone is caused by:
  - A tumor of the adrenal gland.
  - High blood pressure or kidney disease, causing increased production in the kidneys of a hormone (renin) that controls aldosterone levels.

RISK INCREASES WITH

- Kidney disease.
- Congestive heart failure.
- Cirrhosis of the liver.
- Use of oral contraceptives.
- Use of drugs that cause potassium loss.
- Pregnancy.

PREVENTIVE MEASURES

If you have kidney disease or high blood pressure, remain under medical care, and adhere to your treatment program even if you have no symptoms.

EXPECTED OUTCOMES

If the disorder is caused by an adrenal tumor, it is often curable with surgery. If it is caused by kidney disease or high blood pressure, medical treatment for these disorders will control the symptoms.

POSSIBLE COMPLICATIONS

- Congestive heart failure.
- Atherosclerosis.
- Kidney failure.

DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider will do a physical exam and ask questions about your symptoms. Medical tests may include blood studies of electrolyte levels and CT or MRI scan of the kidneys and adrenal glands.
- Treatment usually involves drugs and a sodium-restricted diet.
- Weigh yourself daily and keep a record. Report a gain of 3 or more pounds in a 24-hour period.
- Surgery to remove adrenal gland in some patients.
- Wear a medical alert bracelet to identify your medical condition and any drugs that you take.

MEDICATIONS

- Drugs to decrease the aldosterone effect may be prescribed. This drug may cause breast enlargement and sexual impotence in men. Other drug options are available.
- Drugs for high blood pressure may be prescribed.

ACTIVITY

No limits, if surgery is not necessary. If it is, resume your normal activities gradually.

DIET

Eat a diet that is low in sodium and high in potassium. Foods rich in potassium include dried apricots and peaches, raisins, citrus fruits, lentils, and whole-grain cereals.

NOTIFY OUR OFFICE IF

- You or a family member has symptoms of hyperaldosteronism.
- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.

Special notes:

More notes on the back of this page ☐

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