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PHEOCHROMOCYTOMA

A b s t r a c t : pheochromocytoma is a chromaffin cell tumor that produces and secretes catecholamines. It is a rare cause of secondary hypertension and accounts only for 0.1% of patients with hypertension. While it is potentially a curable cause of hypertension, on the other side unrecognized can cause serious consequences including the death of the patient. Classical clinical manifestations including paroxysmal hypertension together with the usual triad of headaches, palpitations and sweting are present in about two thirds of patients with pheochromocytoma. The diagnosis of pheochromocytoma is established by demonstrating increased levels of catecholamines or catecholamine metabolites in urine or plasma samples. The localization of the tumor includes techniques such as computed tomography, magnetic resonance imaging, and scaning with iodine-labeled metaiodobenzylguanidine, and rarely necessitates positron emission tomography . The definitive treatment is surgical excision of the pheochromocytoma, after necessary pretreatment with catecholamine alpha-receptor blocking agent phenoxybenzamine because its use prevents possible intraoperative complications such as hypertensive crisis and shock. Familial pheochromocytoma is seen in 10% of patients, mainly those with multiple endocrine neoplasia type II, von Hippel-Lindau disease, neurofibromatosis type 1, and familial carotid body tumors. Specific genetic analyses enable the recognition of the genetic basis of the tumor, thus making possible the screening of the patient's family