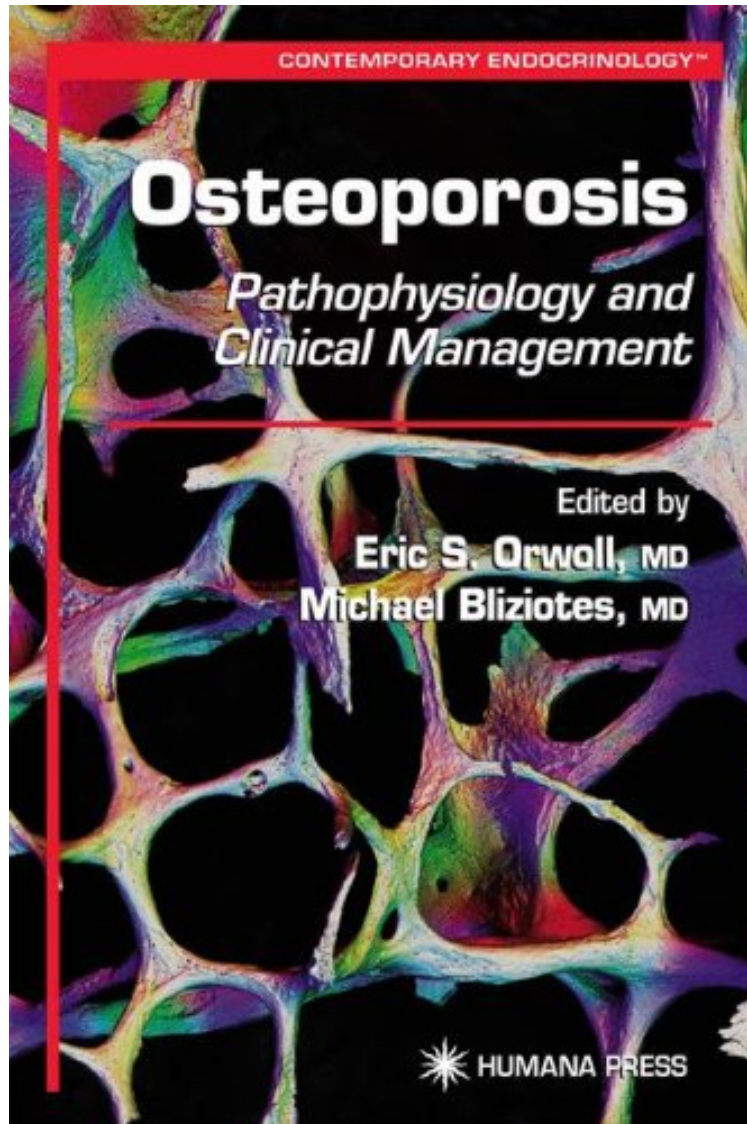


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Osteoporosis: Pathophysiology and Clinical Management (Contemporary Endocrinology)

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recommend to my friends scholars of osteoporosis. Please, forgive me any English mistake committed in this message. 0 of 0 people found the following review helpful. **Osteoporosis: Pathophysiology and Clinical Management** by Jack Irons. This is a solid text concerning everything Osteoporosis. Contains useful charts, tables, and diagrams. It lacks in the color-picture department (or color-anything [excluding the groovy colors on the hardcover book's exterior]), but this lack of colour and pictures is not a deal breaker for me. It is still a great book.

In *Osteoporosis: Pathophysiology and Clinical Management*, leading clinicians and researchers join forces to illuminate in coupled chapters all the major scientific and clinical aspects of osteoporosis. On the basic science side, topics range from the genetics of osteoporosis and bone turnover markers, to androgen action in bone, to the basic biology of estrogen and bone. On the clinical side the authors present the latest thinking about the use of bone densitometry in treatment, the use of vitamin D and its metabolites, and the clinical utilization of salmon calcitonin, as well as parathyroid and bisphosphonate therapies, SERMs, and other important treatments.

From *The New England Journal of Medicine*: Two hundred million women suffer from osteoporosis worldwide (a third of all women between 60 and 70 years of age and two thirds of all women over 80 years of age), with a lifetime risk of fracture between 30 and 40 percent. In men, the lifetime risk of osteoporotic fracture is currently about 13 percent, but the risk is expected to rise with increased life expectancy. The annual incidence of hip fracture is also expected to rise, from 1.7 million in 1990 to 6.3 million in 2050. It is because of these astonishing numbers that osteoporosis has become one of the hottest topics in medicine, with thousands of articles and dozens of textbooks devoted to it every year. Just as I was becoming more and more convinced that nobody needs another multiauthored textbook on osteoporosis (and enjoying the idea that I would not have to write another review of such a book for a long time), there comes along a handsome book of about 600 pages on the pathophysiology and clinical management of osteoporosis, with a twist: the perspectives of authors with basic-science backgrounds are juxtaposed with those of authors with clinical interests, in pairs of chapters that address a single aspect of osteoporosis. The credit for this innovative and ambitious concept goes to the editors, Eric S. Orwoll and Michael Blizotes, both clinical endocrinologists and well-respected authorities on the subject. Some examples of successfully paired chapters are those on the genetics of osteoporosis in mice and humans, the technical aspects of the assessment of peripheral bone mineral density and the use of this measurement in the clinical management of osteoporosis, and mechanical influences on the mass and morphologic features of bone and the role of exercise in the prevention of osteoporosis. Unfortunately, however, there are at least as many instances in which the pairing of basic and clinical presentations of a topic falls apart. For example, after an extensive discussion in chapter 8 about the development of new molecular markers, which, according to the authors, "has greatly enriched the spectrum of serum and urine analytes used in the assessment" of pathologic processes involving the skeleton, we learn in chapter 9 that serum and urine markers are of hardly any use in the diagnosis and management of osteoporosis or, for that matter, most other metabolic bone diseases, with the exception of alkaline phosphatase in Paget's disease. Surprisingly, given the title of the book, hardly any of its 28 chapters deal with the pathophysiology of osteoporosis in earnest. Current advances in the molecular biology of bone in general and in the molecular, biochemical, and cellular changes responsible for the development of osteoporosis in particular are largely ignored. In the few instances in which pathogenetic mechanisms are considered (for example, in chapter 12), they are approached only superficially and without consideration of the state-of-the-art understanding of molecular and cellular biology. The attempt in chapter 12 to review basic aspects of the role of calcium in the development of osteoporosis yields little convincing, hard-core scientific evidence, and the model the authors propose for the role of calcium transport in late postmenopausal bone loss is terribly outdated. In contrast, chapter 13, entitled "Calcium, Bone, and Life," is beautifully written, insightful, and full of wisdom. Also outdated and out of touch is chapter 15, on the basic biology of the action of estrogen on bone. All the major breakthroughs that have taken place in this area during the past decade -- among them the elucidation of tight links among estrogen, cytokines, and osteoclastogenesis and of the direct role of estrogen in the birth and death of osteoblasts and osteoclasts -- are ignored, making the whole discussion of this subject irrelevant. Unfortunately, because of the tardiness inevitable in the publication of a multichapter, multiauthored book, the discussion of the clinical use of estrogens (in chapter 16) is also out of date; it was written before the recent publication of the findings of the Women's Health Initiative study with respect to hormone-replacement therapy. In contrast, I found both the basic and clinical chapters on the action of androgens on bone much more up to date and informative. Conspicuously absent is a chapter on steroid-induced osteoporosis, the third most common form of the disease after postmenopausal and age-related osteoporosis. To my disappointment, not a single chapter addresses the fundamental concepts of bone remodeling or the fact that osteoporosis is caused not by some exotic, out-of-the-blue pathogenetic mechanism but rather by disturbances in the normal process of periodic regeneration of the adult skeleton by teams of osteoblasts and osteoclasts, which constitute the basic multicellular unit of bone. In sharp contrast to the lack of attention to pathophysiology, more than 12 chapters deal in considerable detail with various treatments, from sex-steroid replacement to the use of vitamin D and its metabolites, parathyroid hormone, calcitonin, and bisphosphonates. The two chapters on the basic mechanism of

action of bisphosphonates and their use in the treatment of osteoporosis, as well as the chapter on the use of parathyroid hormone in the treatment of the disease, are particularly insightful and up to date. All in all, this book represents an honest attempt at improving the didactic quality of textbooks on osteoporosis. As is inevitable in a multi-authored book, the quality of the information is spotty and uncritical of "the good, the bad . . . and the irreproducible" research in the field. However, I recommend it because of its innovations and because it is packed with information. Stavros C. Manolagas, M.D., Ph.D. Copyright 2003 Massachusetts Medical Society. All rights reserved. The New England Journal of Medicine is a registered trademark of the MMS. "The editors present an exceptional book focused on pathophysiology as well as on the management of patients with osteoporosis." -European Radiology "I recommend it because of its innovations and because it is packed with information." -New England Journal of Medicine

From the Back Cover With varying degrees of osteoporosis found in one of every four women older than 45 years of age and in nine out of ten women older than 75, as well as in men, osteoporosis is clearly a widespread disease with important health and economic impacts. It is also scientifically complex. In *Osteoporosis: Pathophysiology and Clinical Management*, leading clinicians and researchers join forces to illuminate in coupled chapters all the major scientific and clinical aspects of osteoporosis. By uniquely coupling basic and clinical chapters, the book illustrates the critical interdependence of investigators and practitioners. Traditional issues such as calcium supplementation and exercise are juxtaposed with state-of-the-art updates on molecular pharmacology and imaging. On the basic science side, topics range from the genetics of osteoporosis and bone turnover markers, to androgen action in bone, to the basic biology of estrogen and bone. On the clinical side the authors present the latest thinking about the use of bone densitometry in treatment, the use of vitamin D and its metabolites, and the clinical utilization of salmon calcitonin, as well as parathyroid and bisphosphonate therapies, SERMs, and other important treatments. Unique in its integration of basic science and clinical practice, *Osteoporosis: Pathophysiology and Clinical Management* reveals the great progress that has occurred in the field, providing basic scientists with a clear view of the clinical state-of-the-art, and practicing physicians with a deeper understanding of the complex biology involved.