

*Diseases
of the*
**ENDOCRINE
GLANDS**

SOFFER

Second
Edition



WILEY & SONS

Diseases of the
ENDOCRINE GLANDS

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ENDOCRINE GLANDS

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In Memory
of
My Mother and Father

PREFACE TO THE SECOND EDITION

DURING the five years that have elapsed since the appearance of the first edition of this volume, considerable further progress has been achieved in endocrinology. This is an ever-growing and changing field, one which continues to challenge and stir the imagination and ingenuity of its students. I may be permitted a pardonable pride when I speak of the investigators in this field as the dedicated ones who have embarked on an intellectual adventure of enormous magnitude. Endocrinology is no mere laboratory exercise. Its facts and principles serve to reveal and illuminate processes essential to the understanding of physiological functions in health and their distortion in disease.

During this period many significant contributions have appeared. These have served to invalidate or to clarify many of our older concepts and to introduce new ones. Right or wrong, they serve a constructive purpose in that they stimulate further thought and work. The identification and synthesis of aldosterone, the synthesis of polypeptide hormones such as oxytocin and vasopressin, the chemical identification of corticotropin, the identification of triiodothyronine as a potent thyroidal fraction, all represent landmarks in achievement. The development of various hormonal analogues such as prednisone, prednisolone, and the halogenated compounds of cortisol, which serve to modify the effects of the parent hormones, opens new avenues for the organic chemist and the clinician. In addition, important advances have been made both in the laboratory diagnosis and the clinical management of endocrine disease. These and other numerous changes have been incorporated in this second edition.

In the present volume the section dealing with carbohydrate metabolism and diabetes mellitus has been omitted after a great deal of thought. This step was decided upon essentially for two reasons: 1. an effort to maintain the volume within a reasonable length; and 2. the feeling that this field merits separate treatment because of its complexity and detail. This is reflected in clinical practice, since in many institutions the endocrine and diabetic clinics are maintained as separate entities.

Once more I must publicly express my indebtedness to my associates, Dr. J. Lester Gabrilove and Dr. Arthur R. Sohval, for their wholehearted cooperation. Without them this volume would have been impossible of achievement.

LOUIS J. SOFFER

New York, N.Y.

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