

**ADVANCES IN**  
***Internal Medicine***<sup>®</sup>

**EDITOR**

**G. H. STOLLERMAN**

**ASSOCIATE EDITORS**

**J. S. FORDTRAN**

**W. J. HARRINGTON**

**J. J. LEONARD**

**M. D. SIPERSTEIN**

**VOLUME 27**

# ADVANCES *in* INTERNAL MEDICINE®

## EDITOR

GENE H. STOLLERMAN, M.D.

*Boston University Medical School  
Boston, Massachusetts*

## ASSOCIATE EDITORS

JOHN S. FORDTRAN, M.D.

*Baylor University Medical Center  
Dallas, Texas*

WILLIAM J. HARRINGTON, M.D.

*University of Miami School of Medicine  
Miami, Florida*

JAMES J. LEONARD, M.D.

*Uniformed Services University of the Health Sciences  
Bethesda, Maryland*

MARVIN D. SIPERSTEIN, M.D.

*University of California Medical Service, Veterans Administration Hospital  
San Francisco, California*

VOLUME 27 • 1982

YEAR BOOK MEDICAL PUBLISHERS • INC.

CHICAGO • LONDON

Copyright © 1982 by Year Book Medical Publishers, Inc. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means—electronic, mechanical, photocopying, recording, or otherwise—without prior written permission from the publisher except in cases described below. Printed in the United States of America.

The code at the bottom of the first page of each article in this volume indicates the publisher's consent that copies of the article may be made for personal or internal use. This consent is given on the condition that the copier pay the stated per-copy fee through the Copyright Clearance Center, Inc. (Operations Office, P.O. Box 765, Schenectady, New York 12301) for copying beyond that permitted by Sections 107 or 108 of the United States Copyright Law. This consent does not extend to other kinds of copying, such as copying for general distribution, for advertising or promotional purposes, for creating new collected works, or for resale.

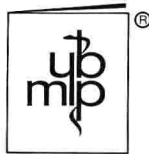
Library of Congress Catalog Card Number: 42-20729

International Standard Serial Number:0065-2822

International Standard Book Number: 0-8151-8297-X

ADVANCES IN INTERNAL MEDICINE®

VOLUME 27



# ADVANCES IN INTERNAL MEDICINE

VOLUMES 1 through 23 (out of print)

## VOLUME 24

- MODE OF ACTION OF ASPIRIN-LIKE DRUGS, *by S. Moncada and J.R. Vane*  
REGULATION OF INSULIN RECEPTORS IN NORMAL AND ABNORMAL PHYSIOLOGY IN HUMANS, *by Robert S. Bar, Len C. Harrison, Michele Muggeo, Philip Gordon, C. Ronald Kahn and Jesse Roth*  
ORAL HYPOGLYCEMIC AGENTS, *by Thomas Boyden and Rubin Bressler*  
HOW GOOD IS THE STATISTICAL EVIDENCE AGAINST ORAL HYPOGLYCEMIC AGENTS, *by Alvan R. Feinstein*  
CLINICAL PHARMACOLOGY OF THE STEROIDAL ORAL CONTRACEPTIVES, *by John L. Durand and Rubin Bressler*  
STEROID RECEPTOR SITES IN CANCER THERAPY, *by William L. McGuire*  
IATROGENIC DISORDERS FROM CANCER TREATMENT, *by W. J. Harrington*  
BONE MARROW TRANSPLANTATION, *by George W. Santos*  
MEDICAL COMPLICATIONS OF DRUG ABUSE, *by Charles E. Becker*  
CURRENT PROBLEMS IN SEXUALLY TRANSMITTED DISEASES, *by P. Frederick Sparling*  
ANTIVIRALS WITH CLINICAL POTENTIAL, *by James P. Luby*  
NATURAL HISTORY AND MANAGEMENT OF POLYCYTHEMIA VERA, *by Ronald Hoffman and Louis R. Wasserman*  
DIGITALIS GLYCOSIDES: CLINICAL PHARMACOLOGY, *by James E. Doherty*  
THE ATHLETE'S HEART, *by Michael H. Crawford and Robert A. O'Rourke*  
NONINVASIVE ASSESSMENT OF LEFT VENTRICULAR FUNCTION, *by Jose Meller, Michael V. Herman and Louis E. Teichholz*  
CONTINUING TREATMENT OF RESPIRATORY INSUFFICIENCY, *by William I. Mariencheck*  
HYPORENINEMIC HYPOALDOSTERONISM, *by Morris Schambelan and Anthony Sebastian*  
ENTERIC HYPEROXALURIA, *by David L. Earnest*  
FLUID AND ELECTROLYTE FLUXES IN THE GUT, *by Sidney F. Phillips and David L. Wingate*  
COMPUTED TOMOGRAPHY OF THE ABDOMINAL ORGANS, *by Patrick R. Sheedy II, David H. Stephens, Robert R. Hattery, Larry R. Brown and Robert L. MacCarty*

## VOLUME 25

- THE PATHOGENESIS OF GYNECOMASTIA, *by Jean D. Wilson, James Aiman and Paul C. MacDonald*  
LACTIC ACIDOSIS, *by Robert Park and Allen I. Arieff*  
PHARMACOLOGIC THERAPY OF PATIENTS WITH PITUITARY TUMORS SECRETING PROLACTIN, GROWTH HORMONE AND ADRENOCORTICOTROPIN, *by Riccardo Vigneri and Ira D. Goldfine*  
HIGH-DENSITY LIPOPROTEINS IN HUMAN HEALTH AND DISEASE, *by John A. Glomset*

- LIPOPROTEIN METABOLISM IN LIVER DISEASE, by *Seymour M. Sabesin, Phillip D. Bertram and Michael R. Freeman*
- CHOLESTATIC LIVER DISEASE: MECHANISMS, DIAGNOSIS AND THERAPY, by *Norman B. Javitt*
- THE MANAGEMENT OF ACUTE PANCREATITIS, by *James T. Ettien and Paul D. Webster, III*
- THROMBOXANE AND PROSTACYCLIN: IMPLICATIONS FOR FUNCTION AND DISEASE OF THE VASCULATURE, by *John C. McGiff*
- THE "CONTACT SYSTEM" IN HEALTH AND DISEASE, by *Hidehiko Saito*
- USE OF RADIONUCLIDES TO EVALUATE MYOCARDIAL STRUCTURE AND FUNCTION, by *Harvey J. Berger and Barry L. Zaret*
- THE SIGNIFICANCE OF NORMAL AND ANOMALOUS ATRIOVENTRICULAR CONDUCTING PATHWAYS IN CARDIAC ARRHYTHMIAS, by *Kenneth M. Rosen, Robert A. Bauernfeind, Steven Swiryn, Ramesh C. Dhingra and Christopher R.C. Wyndham*
- NEWER APPROACHES TO SOLUTE REMOVAL IN CHRONIC RENAL FAILURE, by *L.W. Henderson and M.L. San Felippo*
- HYPERTENSION, THE ADRENAL AND THE KIDNEY: LESSONS FROM PHARMACOLOGIC INTERRUPTION OF THE RENIN-ANGIOTENSIN SYSTEM, by *Norman K. Hollenberg and Gordon H. Williams*
- PSEUDOGOUT AND PYROPHOSPHATE METABOLISM, by *Daniel J. McCarty*
- CELL MARKERS IN LYMPHOMAS AND LEUKEMIAS, by *W. Paul Bowman, Susan Melvin and Alvin M. Mauer*
- SENSITIVITY OF NORMAL AND NEOPLASTIC CELLS TO CHEMOTHERAPEUTIC AGENTS IN VITRO, by *Lois W. Dow*
- CLINICAL USES OF MACROPHAGE INHIBITORS, by *Yeon S. Ahn and William J. Harrington*
- GROUP B STREPTOCOCCAL INFECTIONS, by *Carol J. Baker*
- BACTERIAL ADHERENCE, by *I. Ofek and E.H. Beachey*
- APPRAISAL AND REAPPRAISAL OF VIRAL VACCINES, by *Harry M. Meyer, Jr., Hope E. Hopps and Paul D. Parkman*

## VOLUME 26

- ENDORPHINS AND ENKEPHALINS, by *Hans W. Kosterlitz and Alexander T. McKnight*
- THE AMENORRHEA, GALACTORRHEA AND HYPERPROLACTINEMIA SYNDROMES, by *Mark E. Molitch and Seymour Reichlin*
- THE ROLE OF DIETARY CARBOHYDRATES AND FIBER IN THE CONTROL OF DIABETES, by *James W. Anderson*
- ZINC DEFICIENCY STATES, by *Clifford Tasman-Jones*
- ADVANCES IN THE MULTIMODAL PRIMARY MANAGEMENT OF CANCER, by *Vincent T. DeVita, Jr., Jane E. Henney, and Raymond B. Weiss*
- THROMBOTIC THROMBOCYTOPENIC PURPURA, by *John J. Byrnes*
- RECOGNITION AND TREATMENT OF IRON OVERLOAD, by *Elmer B. Brown*
- NON-A, NON-B HEPATITIS, by *Jules L. Dienstag*
- HYPERAMYLASEMIA: INTERPRETATION AND NEWER APPROACHES TO EVALUATION, by *J. Edward Berk and Louis Fridhandler*

INTESTINAL ADAPTATION TO BOWEL RESECTION, by *Ernest Urban and Elliot Weser*  
VASODILATOR THERAPY OF CONGESTIVE HEART FAILURE, by *Jay N. Cohn*  
NEURAL CONTROL OF THE HEART IN HEALTH AND DISEASE, by *Thomas N. James*  
SLEEP APNEA SYNDROME: RECENT ADVANCES, by *Christian Guilleminault, Joseph Cummiskey and William C. Dement*  
TREATMENT OF RENAL CALCULI, by *Frederic L. Coe and Murray J. Favus*  
BACTERIAL VARIATION AND ANTIBIOTIC ACTION, by *Barry I. Eisenstein*  
ENDOTOXIC IMMUNITY, by *Abraham I. Braude*  
SYNDROMES OF CYTOMEGALOVIRUS INFECTION, by *Robert F. Betts*  
DNA ANTIBODIES IN SYSTEMIC LUPUS ERYTHEMATOSUS AND PSEUDOLUPUS SYNDROME, by *Andrew Chubick*  
MYASTHENIA GRAVIS AND AUTOIMMUNITY, by *John N. Whitaker*

## Editors' Preface

THE SELECTION OF REVIEWS for the 27th volume of this series again posed a challenge to the editors to remain within the confines of twenty topics while highlighting some of the most important new insights into the practice of the broad field of internal medicine. To appreciate the complementary nature of these selections to others made in recent years, the reader is invited to consult the cumulative index in this volume. The reviews published over the past several years, still timely, swell our coverage to more than 100 essays that document relevant clinical investigations with approximately 10,000 references.

Again, the topics are grouped, for convenience, by each editor's selections, but they often defy conventional subspecialty boundaries.

### ENDOCRINOLOGY AND METABOLISM

As the title of Dr. Bikle's review of the role of vitamin D in calcium metabolism implies, vitamin D is now recognized as more properly representing an important steroid hormone rather than simply a vitamin. Synthesized in the skin, this steroid must be 25-hydroxylated in the liver and, finally, is converted in the kidneys to 1-25 hydroxyvitamin D—the most active form of vitamin D. Serious clinical conditions can result from interruption of this processing of vitamin D at any of these stages, as well as from resistance to the action of the hydroxylated vitamin D at its peripheral tissue sites of action.

Diabetes insipidus, caused by a deficiency of antidiuretic hormone, and the opposite syndrome—inappropriate ADH secretion (SIADH)—are problems confronting the internist with increasing frequency. Drs. Moser and Notman have provided the physician with a straightforward discussion of the tests needed to diagnose these two conditions. The use and limitations of desmopressin in the treatment of diabetes insipidus, and of



lithium, demeclocycline, and water restriction in the treatment of SIADH are carefully and realistically presented.

Perhaps the most impressive practical achievement in the field of bone disease over the past decade has been the development of two very effective methods for the treatment of Paget's disease. Dr. Wallach's extensive review of this condition presents current thinking regarding the etiology, diagnosis and treatment of this disease. It is now apparent that, with calcitonin and diphosphonates, the great majority of symptomatic patients with Paget's disease can look forward to long-term suppression of their symptoms and disease.

Palpable thyroid nodules are detected in as many as 5 out of 100 adults in the United States. Determining whether or not such a thyroid nodule is malignant represents one of the most important, yet difficult, decisions facing the endocrinologist. Drs. Klonoff and Greenspan have carefully evaluated the risk factors for malignancy in the various histologic types of thyroid nodules and have presented a very practical scheme of diagnostic criteria by which both the internist and the endocrinologist can approach this important problem through differential diagnosis.

The differential diagnosis of accidental hypothermia is of particular importance since, as emphasized in Dr. Fitzgerald's review of the subject, the most common misdiagnosis in this disease is that of *death!* Dr. Fitzgerald extensively reviews the symptoms and underlying conditions that predispose to hypothermia. Therapy with active and passive warming is well discussed, as are the other treatment modalities.

#### GASTROENTEROLOGY

Drs. Cattau and Castell emphasize a highly practical clinical approach to the symptoms of esophageal disease, including the pathophysiology of esophageal dysfunction and its appropriate evaluation.

Numerous etiologic agents that can cause inflammatory bowel disease, from *Clostridium* to *Yersinia*, are described by Drs. Janowitz and Sachar. In addition, these authors present a comprehensive analysis of the natural history and therapy of Crohn's disease and ulcerative colitis, which remain the great etiologic puzzles of gastroenterology.

For those who want an update on one of the most exciting frontiers of biologic research, we are pleased to present Drs. Shorter and Tomasi's review. It tells about the critical role of the immune system of the gut in host defense against microbes and carcinogens, and reveals the gut to be the primary site for sensitization of immunocytes that subsequently inhabit other mucosal sites and secretory organs, such as the breast.

The chapter by Tucker and Schuster addresses the most common of all digestive disease problems, the irritable bowel syndrome. The authors emphasize the evidence (still incomplete) that this syndrome is caused by a primary defect in smooth muscle motility, rather than by psychic stress.

### INFECTION AND IMMUNOLOGY

C-reactive protein (CRP), the prototype acute-phase reactant, has finally been chemically defined, its primary structure has been identified, and the kinetics of its production by the liver have been documented. The chapter by Dr. Gewurtz and his colleagues focuses on the biologic properties of CRP and examines its relation to the amyloid-associated proteins and other acute-phase responses, thereby enhancing our interest in learning more about its interaction with the membranes of many host cells, as well as those of many microbial agents.

The clinical spectrum of vasculitis ranges from a primary disease process restricted to blood vessels in the absence of an underlying systemic disease to a secondary component of another primary systemic disease. Drs. Cupps and Fauci provide a clinical and pathologic outline and classification of these diseases that include their responses to immunosuppressive and anti-inflammatory therapeutic agents.

Rapidly evolving changes in the epidemicity and virulence of group A streptococcal infections in different parts of the world and varying frequencies of the appearance of their postinfectious sequels—rheumatic fever and glomerulonephritis—are reviewed by Dr. Stollerman, who emphasizes the apparent heterogeneity of strains within this species. Spectacular breakthroughs in the chemical definition of the M proteins and their purification, to the point of the definition of the primary structure of the molecules of these surface antigens, open the way to

the future preparation of streptococcal vaccines and to elucidation of the chemical basis of interactions and crossreactivity of streptococcal products with host tissues.

### CIRCULATORY DISEASES

Doctors Swan and Ganz, the developers of the balloon flotation catheter system, outline the principles of hemodynamic monitoring. Their system has made bedside measuring of cardiac output end filling pressures possible. From these data, preload, afterload, and indices of cardiac contractility can be obtained. This information, in turn, more accurately defines cardiac function than does clinical evaluation based on physical findings. The authors clearly outline the indications for hemodynamic monitoring and demonstrate how this information can be used to assess cardiac function.

Drs. Lees and Myers describe the recent development of a series of techniques that hold promise for earlier and more accurate diagnosis of the anatomical as well as the physiologic deficit caused by peripheral atherosclerosis without resorting to invasive procedures. The authors clearly describe the principles upon which these techniques are based. This understanding will allow the reader to make an intelligent individual selection of the test most likely to answer the clinical question being asked.

The various types of hypertension that occur during or are complicated by pregnancy are reviewed by Dr. Sullivan. Unfortunately, the causes and natural history of these subsets have been poorly defined. As a result, the morbidity and mortality as well as the effect of therapeutic intervention are incompletely documented. Nevertheless, Dr. Sullivan's review points out that much is known about the pathogenesis of such conditions as eclampsia and preeclampsia, and makes recommendations concerning management based on intelligent therapeutic principles.

The use of calcium antagonists in clinical medicine, especially in clinical cardiology, has dramatically increased in recent years. Doctors Hope and Lazzara briefly review the role of calcium ions in the excitation-contraction process. The reader is thus provided with a clearer understanding of the biochemical basis for the use of these "slow channel blockers" in the

treatment of cardiac arrhythmias and various types of angina pectoris. Other emerging uses of the calcium antagonists in the practice of cardiology are described.

### **Hematology and Oncology**

Immunoregulation as it relates to autoimmunity is the central problem in the pathogenesis of many diseases. Drs. Miller and Schwartz, in an exceptionally lucid article, present the latest views in this rapidly moving field.

Acquired aplastic anemia is a devastating syndrome, previously nearly always lethal. Drs. Rapoport and Nathan present current experiences from many centers. Most patients may now be successfully treated with marrow transplantation, if suitable conditions prevail.

Cis-platinum is a recently introduced antineoplastic agent that differs from all other chemotherapeutic drugs. It is especially effective in the treatment of testicular cancer. Drs. Williams and Einhorn, leaders in its evaluation, provide a concise review of the present status of "the most exciting antineoplastic agent that has entered clinical practice in a number of years."

Adverse pulmonary reaction to transfusion may occur in several clinical settings and constitutes one of the more common causes for the adult respiratory distress syndrome and shock lung. Dr. Jacob and his co-workers have provided most of the new insights into cause and management. Drs. Hammer-schmidt and Jacob have written an entertaining and authoritative article on this topic.

# Contributors

DANIEL BIKLE, M.D., PH.D.

*University of California Service, V.A. Hospital, San Francisco, California*

DONALD O. CASTELL, M.D.

*The Gastroenterology Branch, Internal Medical Service, National Naval Medical Center and Digestive Diseases Division, Department of Medicine, Uniformed Services University of the Health Sciences, Bethesda, Maryland*

EDWARD L. CATTAU, JR., M.D.

*The Gastroenterology Branch, Internal Medical Service, National Naval Medical Center, and Digestive Diseases Division, Department of Medicine, Uniformed Services University of the Health Sciences, Bethesda, Maryland*

THOMAS R. CUPPS, M.D.

*Laboratory of Immunoregulation, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, Maryland*

LAWRENCE H. EINHORN, M.D.

*Indiana University Medical Center, Indianapolis, Indiana*

ANTHONY S. FAUCI, M.D.

*Laboratory of Immunoregulation, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, Maryland*

BARRY FIEDEL, PH.D.

*Department of Immunology/Microbiology, Rush Medical College, Chicago, Illinois*

FAITH T. FITZGERALD, M.D.

*University of California, Davis, California*

WILLIAM GANZ, M.D.

*The Division of Cardiology, Department of Medicine, Cedars-Sinai Medical Center, UCLA School of Medicine, Los Angeles, California*

HENRY GEWURZ, M.D.

*Department of Immunology/Microbiology, Rush Medical College, Chicago, Illinois*

FRANCIS S. GREENSPAN, M.D.

*The Metabolic Research Unit and Departments of Medicine and Radiology, University of California, San Francisco, California*

DALE E. HAMMERSCHMIDT, M.D., F.A.C.P.

*Division of Hematology, University of Minnesota Medical School, Minneapolis, Minnesota*

R. R. HOPE, M.D.

*Department of Medicine, Cardiovascular Section, University of Oklahoma Health Sciences Center, Oklahoma City, Oklahoma*

HARRY S. JACOB, M.D.

*Division of Hematology, University of Minnesota Medical School, Minneapolis, Minnesota*

HENRY D. JANOWITZ, M.D.

*Department of Medicine, The Mount Sinai Medical Center, New York, New York*

CAROL JESSOP, M.D.

*Massachusetts General Hospital, Boston, Massachusetts*

DAVID C. KLONOFF, M.D.

*The Metabolic Research Unit and Departments of Medicine and Radiology, University of California, San Francisco, California*

R. LAZZARA, M.D.

*Department of Medicine, Cardiovascular Section, University of Oklahoma Health Sciences Center, Oklahoma City, Oklahoma*

ROBERT S. LEES, M.D.

*Professor of Cardiovascular Disease, Massachusetts Institute of Technology, Cambridge, Massachusetts; and Director, Noninvasive Diagnostic Laboratory, Massachusetts General Hospital, Boston, Massachusetts*

KENNETH B. MILLER, M.D.

*Department of Medicine, Hematology-Oncology Division, Tufts-New England Medical Center, Tufts University School of Medicine, Boston, Massachusetts*

CAROLYN MOLD, Ph.D.

*Department of Immunology/Microbiology, Rush Medical College, Chicago, Illinois*

ARNOLD M. MOSES, M.D.

*V.A. Medical Center and Department of Medicine, State University of New York, Upstate Medical Center, Syracuse, New York*

GORDON S. MYERS, M.D.

*Senior Physician, Massachusetts General Hospital; and Associate Clinical Professor of Medicine, Harvard Medical School, Boston, Massachusetts*

DAVID G. NATHAN, M.D.

*Robert A. Stranahan Professor of Pediatrics, Division of Hematology and Oncology, Children's Hospital Medical Center and The Sidney Farber Cancer Institute; Department of Pediatrics, Harvard Medical School, Boston, Massachusetts*

DOUGLAS D. NOTMAN, M.D.

*V.A. Medical Center and Department of Medicine, State University of New York, Upstate Medical Center, Syracuse, New York*

JOEL M. RAPPEPORT, M.D.

*Assistant Professor of Medicine, Division of Hematology, Brigham and Womens Hospital; and Department of Medicine, Harvard Medical School, Boston, Massachusetts*

DAVID B. SACHAR, M.D.

*Department of Medicine, The Mount Sinai Medical Center, New York, New York*

MARVIN M. SCHUSTER, M.D.

*Johns Hopkins University School of Medicine, Division of Digestive Diseases, Baltimore, Maryland*

ROBERT S. SCHWARTZ, M.D.

*Department of Medicine, Hematology-Oncology Division, Tufts-New England Medical Center, Tufts University School of Medicine, Boston, Massachusetts*

ROY G. SHORTER, M.D.

*Professor of Medicine and Pathology, Mayo Medical School, Rochester, Minnesota*

JOAN SIEGEL, Ph.D.

*Department of Immunology/Microbiology, Rush Medical College, Chicago, Illinois*

GENE H. STOLLERMAN, M.D.

*Division of General Medicine, Boston University Medical School, Boston, Massachusetts*

JAY M. SULLIVAN, M.D.

*Division of Cardiovascular Diseases, University of Tennessee, Center for the Health Sciences, Memphis, Tennessee*

H. J. C. SWAN, M.D., Ph.D.

*The Division of Cardiology, Department of Medicine, Cedars-Sinai Medical Center, UCLA School of Medicine, Los Angeles, California*

THOMAS B. TOMASI, JR., M.D., PH.D.

*Professor of Medicine, Mayo Medical School, Rochester, Minnesota*

HAROLD TUCKER, M.D.

*Johns Hopkins University School of Medicine, Division of Digestive Diseases, Baltimore City Hospital, Baltimore, Maryland*

STANLEY WALLACH, M.D.

*Medical and Research Services, V.A. Medical Center and Department of Medicine, Albany Medical College, Albany, New York*

STEPHEN D. WILLIAMS, M.D.

*Indiana University Medical Center, Indianapolis, Indiana*



# Contents

## **Treatment of Paget's Disease.**

<i>By</i> STANLEY WALLACH, M.D. . . . .	1
Demographic and Etiologic Considerations . . . . .	1
Clinical Features . . . . .	3
Musculoskeletal Symptoms and Findings . . . . .	4
Neurologic Symptoms and Findings . . . . .	11
Miscellaneous Symptoms and Findings . . . . .	15
Laboratory and Radiologic Features . . . . .	16
Treatment Indications . . . . .	18
Calcitonin . . . . .	22
Etidronate . . . . .	31
New Diphosphonates . . . . .	34
Mithramycin . . . . .	37
Combination Treatment . . . . .	38
Associated Osteoarthritis . . . . .	39
Conclusions . . . . .	39

## **The Vitamin D Endocrine System.**

<i>By</i> DANIEL BIKLE, M.D., PH.D. . . . .	45
Introduction . . . . .	45
Bioavailability . . . . .	47
Metabolism . . . . .	49
Target Tissue Response . . . . .	53
Clinical Syndromes Affecting the Vitamin D	
Endocrine System . . . . .	58
Decreased Bioavailability . . . . .	59
Abnormal Metabolism . . . . .	61
Abnormal Target Tissue Response . . . . .	64
Summary . . . . .	66

## **Diabetes Insipidus and Syndrome of Inappropriate**

### **Antidiuretic Hormone Secretion (SIADH). *By* ARNOLD**

M. MOSES, M.D., and DOUGLAS D. NOTMAN, M.D. . . . .	73
Central Diabetes Insipidus . . . . .	73
Pathophysiology . . . . .	73