

## **Symptoms and Signs/Obsolete/Evergreen/New Aorta - Whose Speciality**

OP Kapoor

**I**f on examination the pulse is unequal on both sides, most likely the patient has a disease of Arch of Aorta.

In olden days we used to see frequently Aortitis and Aneurysm involving ascending Aorta - the aetiology was syphilis. Most of the diseases of Aorta seen nowadays are due to Atherosclerosis and are seen in elderly patients specially who are diabetic or hypertensive.

In the modern times when the haematological and immunological blood tests are advanced and the entity of "Vasculitis" has become clear, many

diseases of this illness affects the Aorta - For example, Polymyalgia Rheumatica. The fact is the most common cause nowadays is Vasculitis of Aorta.

Blood tests should be sent for-

1. E.S.R.
2. C.R.P.
3. A.N.A.
4. MPO and PR3(Anca C and P)
5. I.L.- 6
6. H.I.V.
7. HBs Ag
8. Anti HCV
9. IgG4

These patients would need to be given steroids, Cyclophosphamide, Azaprine and other immune suppressive drugs. Can a cardiologist deal with this therapy

---

Ex. Hon. Physician, Jaslok Hospital and Bombay Hospital, Mumbai, Ex. Hon. Prof. of Medicine, Grant Medical College and JJ Hospital, Mumbai - 400 008.

### **The Value in an Ambulatory Blood-Pressure Registry**

Ambulatory blood-pressure monitoring provides the best confirmation of the presence of hypertension detected in the office setting.

Ambulatory blood-pressure monitoring allows for differentiation of the nocturnal and daytime blood-pressure profiles, provides prognostic information for determination of the risk of cardiovascular disease, and predicts the rate of progression of kidney disease.

They observed that ambulatory blood-pressure measurements were a stronger predictor of all-cause and cardiovascular mortality than clinic blood-pressure values.

The take-home message from this study is that ambulatory blood-pressure monitoring is a valuable tool in the assessment of the most important and treatable factor worldwide contributing to premature death and disability, namely, blood pressure. The ominous effect of white-coat hypertension has been noted by others, and it is probably related to the increasing magnitude (i.e., the difference between clinic blood pressure and ambulatory blood pressure) of white-coat hypertension with age.

**Raymond R. Townsend, The NEJM, April 2018, Vol 378, 1555-1556**