

Hypertonia

Arterial Hypertonia:

Primary essential hypertonia, cause unknown	(90% of all hypertonias)
Secondary hypertonia	renal (parenchymatous, tumors, renovascular by stenosis of kidney arteries), endocrine (pheochromocytoma, Cushing / Conn syndrome, AGS, acromegaly, rare: renin-secreting tumors), isthmusstenosis of aorta;
Other causes	temporary hypertonia in cerebral disorders (encephalitis, brain pressure, poliomyelitis), acute poisonings (e.g. carbon monoxide), pregnancy, drugs (ovulation inhibitors, corticosteroids, carbenoxolon, non-steroidal antirheumatics, cyclosporin A), drug abuse (cocaine, amphetamine).

Pulmonal Hypertonia:

Disorders of the lung	chronic obstructive lung disease, restrictive disorders (fibrosis, pneumoconiosis, granulomatosis), cystic fibrosis, others (alveolar proteinosis, pulmonal amyloidosis);
Cardiac disorders	Left-to-right shunt (Eisenmenger reaction), pulmonary venous hypertonia (left cardiac insufficiency, mitral insufficiency), (right cardiac insufficiency without pulmonary hypertonia, e.g. restrictive cardiomyopathy, pericarditis constrictiva, pulmonary valve stenosis);
Disorders of lung vessels	relapsing (macro-) embolism; collagen disorders, arteriitis of pulmonary vessels (Takayasu arteritis), schistosomiasis / filariasis, stay in >2000 meters, sickle cell anemia, hemangiomatosis of lung vessels;
Disturbances of breathing function	Sleep apnea syndrome, other hypoventilation syndromes, neuromuscular disorders and hypoventilation, thorax deformations;
Others	drug side effects (menocil, rarely other appetite depressants), hepatic cirrhosis, intravenous drug abuse, HIV infection;

For complete list of laboratory test offered at Freiburg Medical Laboratory, please visit <http://www.fml-dubai.com/parameter-listings/>