

AGM

%	20 of AG
Is	-a modified symp gang (hence its origin)
Cells	-chromaffins
Secretes	-CAT (80% E & 20% NE) -dopamine
Control	Pregang signals
CAT origin	Tyrosin → Dopamine → NE → E
PNMT	-is: Phenylethanolamine N-methyltransferase (enz) -fun: converts NE to E -place: ONLY in medulla (so all body E comes only from medulla, cuz it's the only place that NE can be converted into E; however, postgang nerves can secrete NE)
E	-strongest stimulator of the heart
NE	-strongest VC (strongest controller over BP) -is the precursor for E -can be converted into <u>normetanophrine</u> & <u>VMA</u> "vanillyl mandelic acid" -urine VMA is an indicator for pheochromocytoma
E & NE together	-trigger "fight or flight" mode -eye: pupil dilation -heart: inc: in HR, CO, BP, contr force & peripheral resistance -resp: bronchiolodilation (bronchioles - cuz big bronchus isn't involved in contr, cuz it has cartilagous rings & it doesn't contract, but the small ones do & they cause asthmatic attack & they're the ones anti-histamine work on to relieve an attack) -Carbs: glycogenolysis & glucogenesis "causing hyperglycemia" (by liver & muscles) -inc over-all metabolic rate -skin: sweaty -GIT & bladder: sphincters contr & walls relaxation -GIT: dec secretions & motility -renal: secretes renin

pheochromocytoma

Is	AGM tumor
Progression	Can be lethal
Epedim	Mid-age
Symptoms	<ul style="list-style-type: none"> -sudden severe headache (most common) -pallor skin (looks pale) -exagg sweat -extreme anxiety & fear -palpitation (feeling the heart beats) "tachycardia & high BP" -episodic extreme hypertension -abdominal pain -weight loss -orthostatic hypotension (a sudden fall in BP upon standing - systolic < 90 + diastolic < 60) -hyperglycemia & lipolysis (CAT effect - with less muscles glucose uptake)