## Abstract

Primary hyperaldosteronism (PA) is one of the most common endocrine cause for secondary hypertension. It is caused by adrenal hyperplasia, adenoma, carcinoma or combination of hyperplasia along with an adrenal incidentaloma. A clear differentiation of those variant subtypes would be challenging and important for deciding the best treatment options. Here I report a case of a medical professional presenting with long standing refractory hypertension with persistent hypokalemia who was found to be having increased levels of plasma aldosterone concentration (PAC), suppressed plasma renin activity (PRA) and right adrenal adenoma as the secondary cause for resistant hypertension.