CURE RATES AND SURVIVAL IN PATIENTS WITH ACROMEGALY

Simona Galoiu [1,2], Andreea Suvoiala[1], Mariana Purice[2], Andra Caragheorgheopol[2], Raluca Trifanescu[1,2], M. Coculescu[1,2], Catalina Poiana [1,2]

[1]- Endocrinology , "Carol Davila" University of Medicine and Pharmacy,
[2] –"C.I. Parhon" National Institute of Endocrinology Bucharest, Romania

OBJECTIVES

To assess cure rates of different therapeutic protocols and the impact of these therapies on survival.

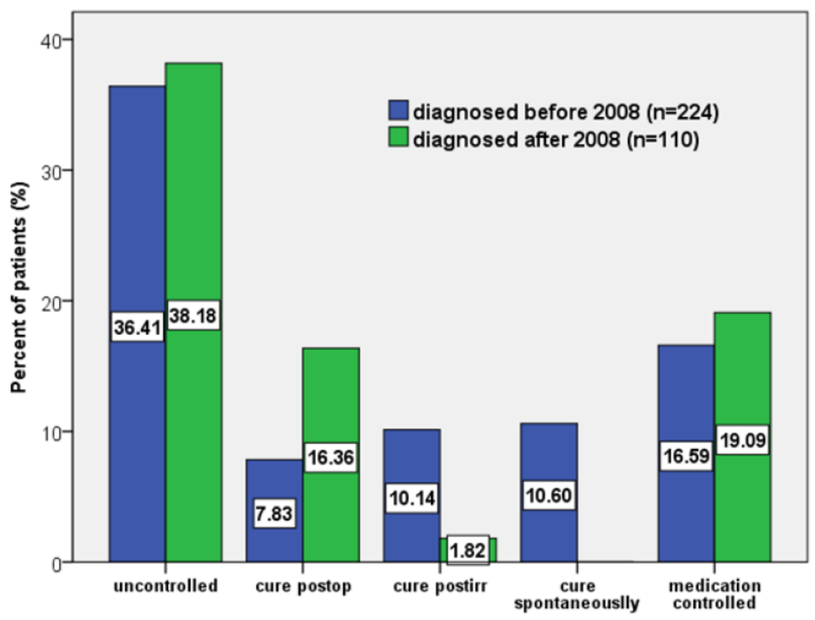
METHODS

- N=334 patients (224 F/110 M, mean age 48.1±0.7 years) with acromegaly admitted in a single Neuroendocrinology Department
- Study duration: Jan.2001-Dec.2013
- Retrospective, analytical study
- GH, IGF1 levels at baseline and at final visit, therapy, pituitary failure, date of the death
- Serum GH levels were measured by IRMA (sensitivity 0.1 ng/ml).
- Statistics: PAMCOMP computation program -standardized mortality ratio (SMR). Kaplan Meier curve –to compare the impact of different therapies on survival.

RESULTS

CURE RATES

- Surgery: 35/197 patients = 17.7%
- SSA: 49/128 patients = 33.5 %
- DPA: 4/48 patients = 8.3 %
- GHRA: 6/16 patients= 37.5 %
- Radiotherapy: 23/153 = 15.03%

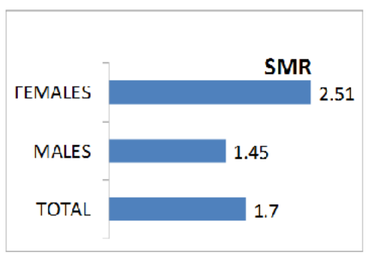


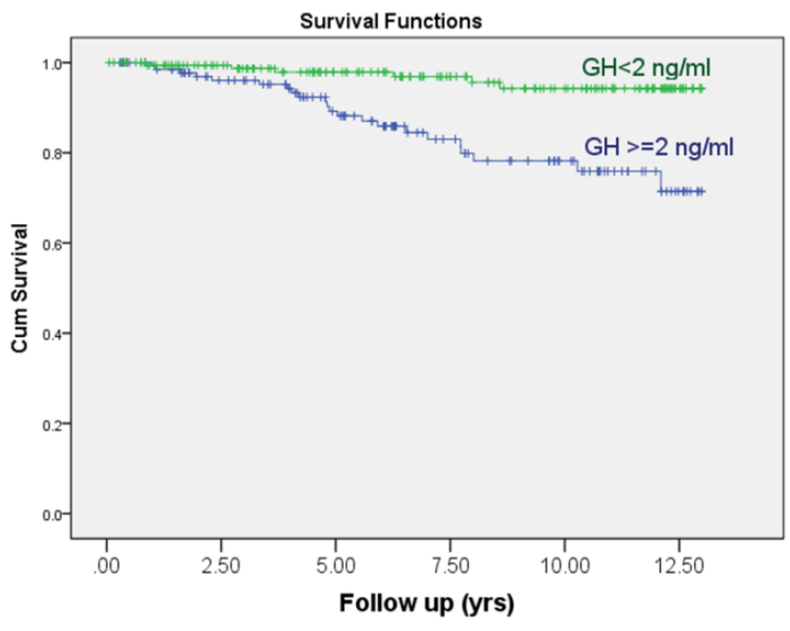
	Correlation coeff. B	Standard error	p	HR	95.0% CI Lower	95.0% CI Upper
Age at baseline (yrs)	-0.032	0.016	0.044	0.968	0.938	0.999
SSA treatment	1.439	0.548	0.009	4.217	1.441	12.340
Preoperative GH (ng/ml)	-0.062	0.021	0.003	0.940	0.902	0.980

Independent factors predicting surgical cure in patients with acromegaly

MORTALITY

- follow-up 6.8 years (median) -1963.2 person years
- deceased: n=29 (8.86%)
- crude death rate:12.6 deaths/1000 person years
- SMR = 1.07 [95% Confidence interval (CI) 0.70-1.52]
- mean age at death 62.8 ± 2.4 years





SURVIVAL IN PATIENTS WITH GH > 2 NG/ML

CONCLUSIONS

Patients with acromegaly and posttreatment GH level ≥2 ng/ml had a high mortality, especially women. Surgery treated patients, with additionally treatment for postoperatory remnants, had a better survival, similar with general population.

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