

# EVOLUTION OF METABOLIC AND PSYCHIATRIC DISORDERS AFTER REMISSION OF CUSHING'S DISEASE

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## INTRODUCTION

Cushing's disease (CD) is a rare endocrine disorder characterized by endogenous hypercortisolism, which is associated with metabolic and psychiatric disorders. It is essential to understand the impact of normalization of serum cortisol in the evolution of these comorbidities.

## OBJECTIVES

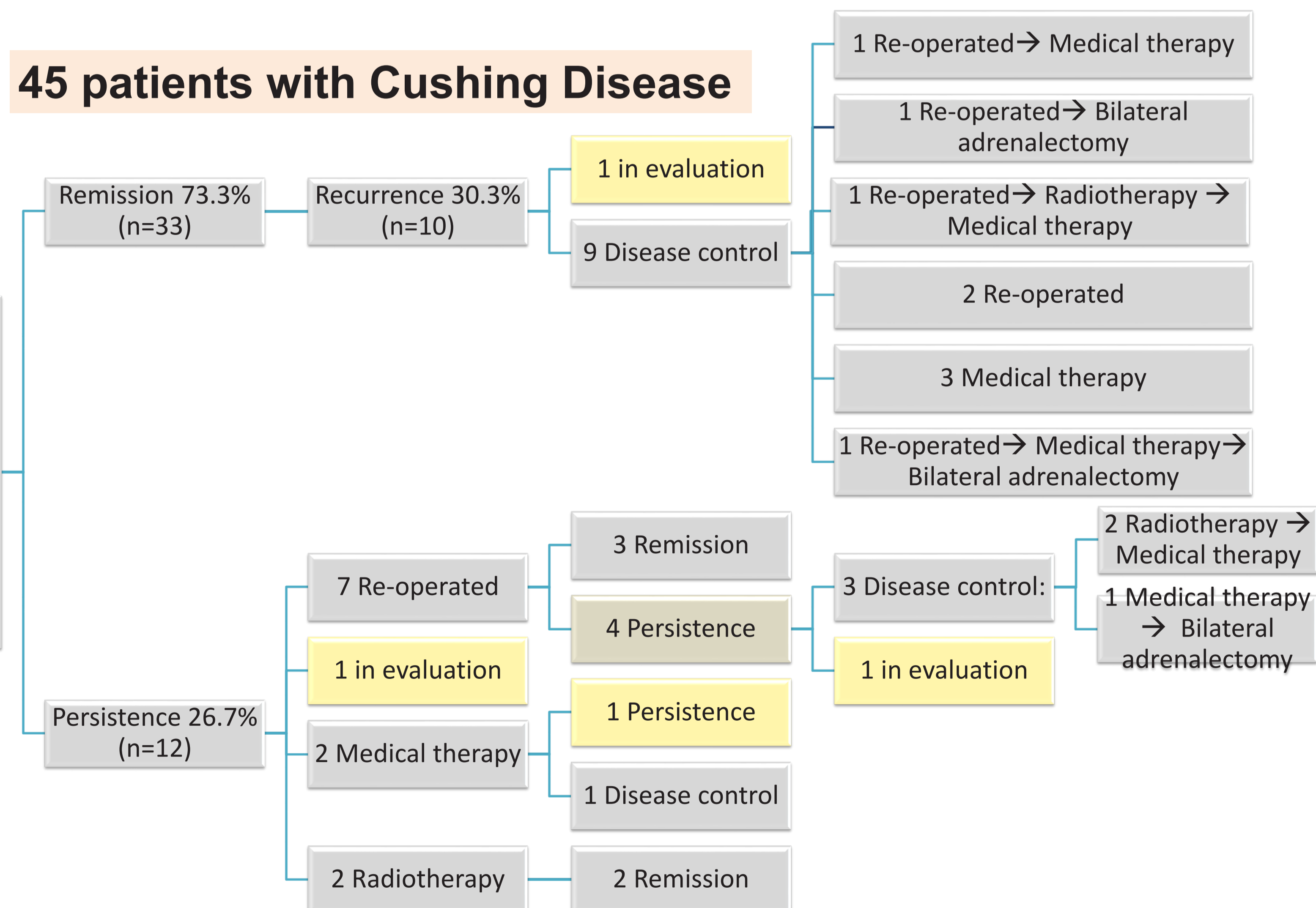
To evaluate the evolution of metabolic and psychiatric disorders after biochemical control of hypercortisolism in patients with CD.

## PATIENTS AND METHODS

- ✓ Retrospective observational study of patients with CD who underwent pituitary surgery between January/1998-October/2013.
- ✓ Clinical data were evaluated at diagnosis and at the last evaluation of hospital consultation.
- ✓ Remission was defined as normal urinary free cortisol and normal plasma cortisol after overnight or low-dose dexamethasone suppression test.

## RESULTS

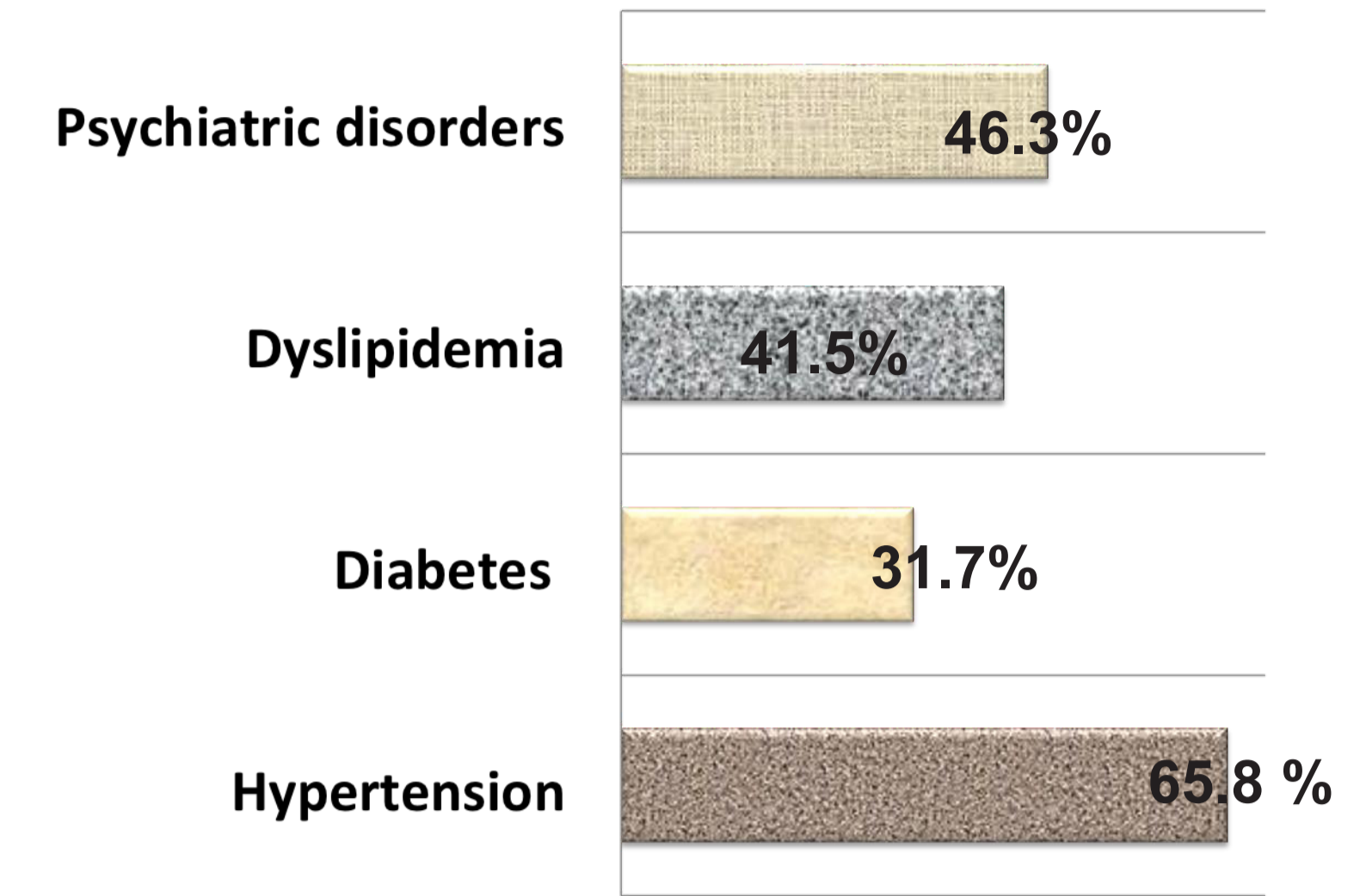
### 45 patients with Cushing Disease



87% (n=39) women  
 Mean age at diagnosis 38.2(12.9) years-old  
 Median follow-up 90.4(56.7) months

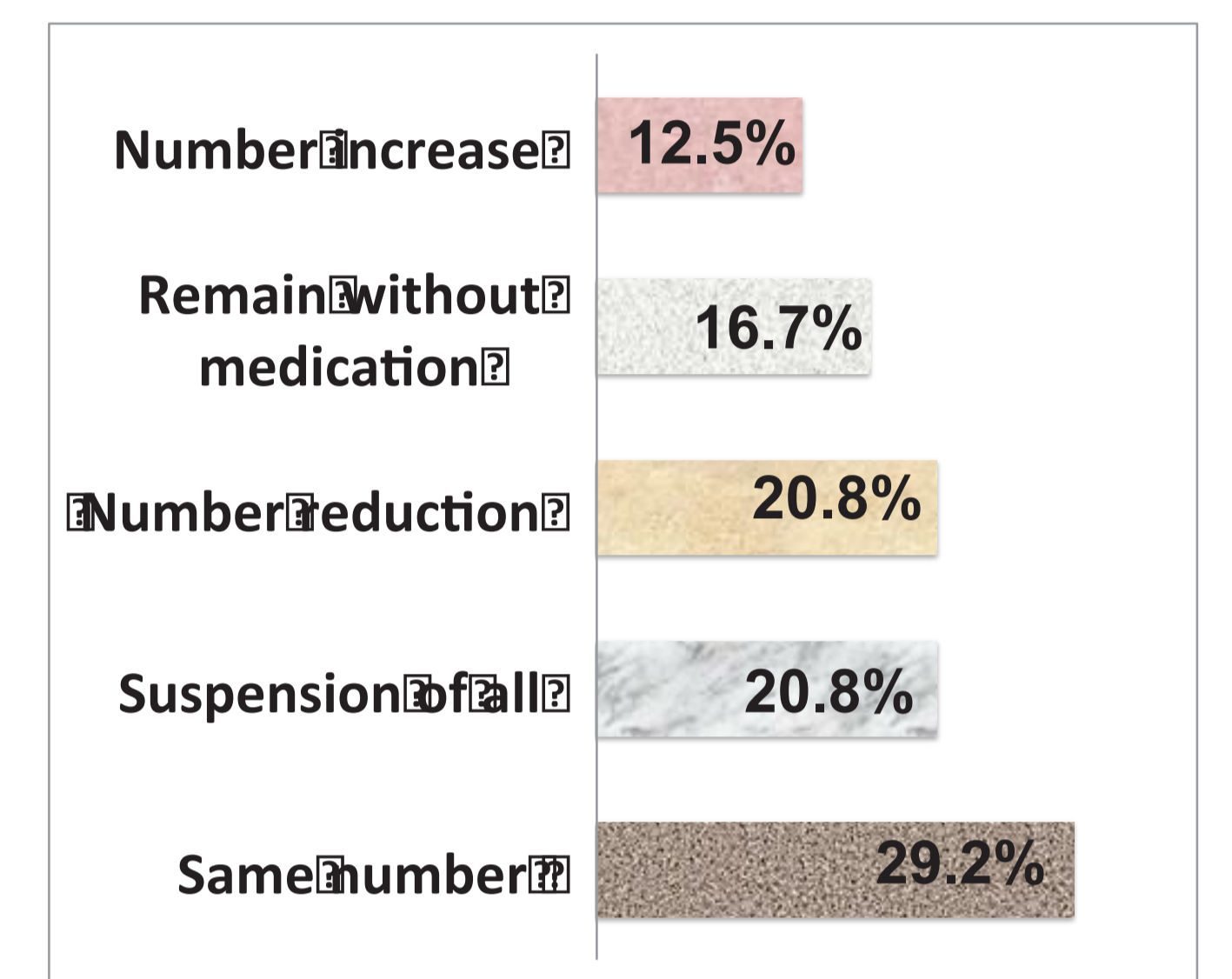
### 41 patients in remission at the last evaluation

### METABOLIC AND PSYCHIATRIC DISORDERS AT DIAGNOSIS



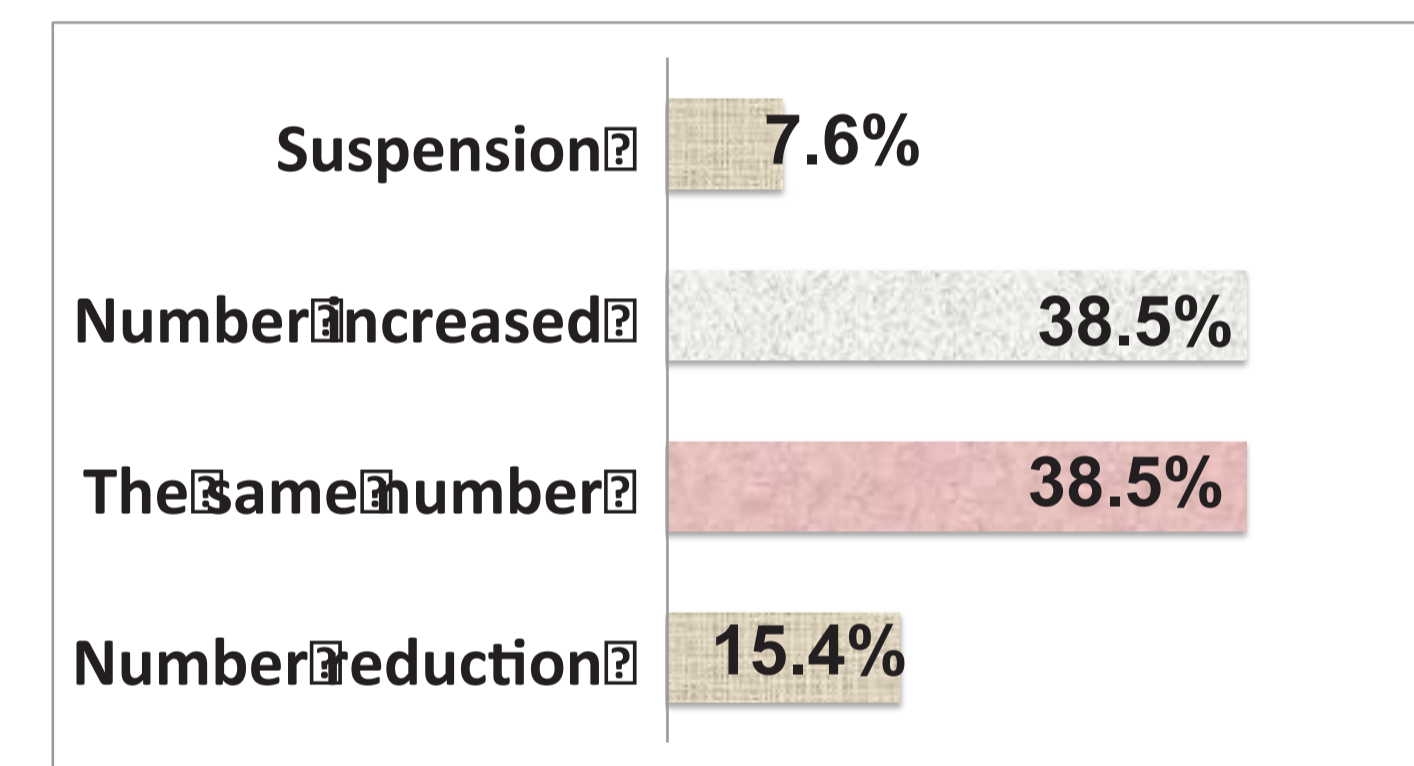
### AFTER BIOCHEMICAL CONTROL OF HYPERCORTISOLISM

#### ❖ ANTIHYPERTENSIVE DRUGS



#### ❖ REMISSION OF DIABETES 15.3% (2)

##### ✓ Oral antidiabetic agents



##### ✓ Insulin



#### ❖ ANTI-DYSLIPIDEMIC THERAPY



#### ❖ PSYCHOTROPIC DRUGS



#### ❖ BMI

The mean initial body mass index was 32Kg/m<sup>2</sup> and no significant differences regarding BMI were found after biochemical control of hypercortisolism. However, 46% of patients had a reduction in BMI class

## DISCUSSION AND CONCLUSION

Biochemical control of hypercortisolism seems to improve the associated metabolic and psychiatric disorders in CD. However, as it is not possible to predict the evolution of these comorbidities it is mandatory an appropriate follow-up, evaluation and treatment of these patients.