



RESULTS OF TRANSSPHEOIDAL SURGERY, SOMATOSTATIN ANALOGUES THERAPY, AND THEIR COMBINATION IN ACROMEGALY

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ABSTRACT

RESULTS

Introduction. Data obtained from medical centers on transsphenoidal surgery (TSS) and effects of somatostatin analogue therapy (SSA) in acromegaly differ. We analyzed the data on TSS, SSA, and their combination in acromegalic patients of Moscow region.

Design. In this study 117 acromegalic patients (25 males and 92 females, 55.0 [IQR 44 - 62] years) were eligible for participation (included), of whom 34 (patients) had newly diagnosed acromegaly (NA group) (macroadenoma (macro)- 80%), 35 (patients) had already been treated with SSA group (macro - 60%), 29 (patients) were after TSS, (macro - 73%), 19 (patients) were treated with SSA after TSS (macro - 95%). In 34 NA patients we estimated the efficiency of SSA in 24 patients (macro -78%) and TSS in 10 patients (macro - 70%) in 6 months In 10 patients (macro -100%) with uncontrolled acromegaly after TSS we also estimated the efficiency of SSA therapy in 6 months (SSA+TSS group).

Results. In micro adenoma cases the number of patients with controlled phase of acromegaly in TSS group was similar to those in SSA group (47% and 43% respectively). In macro adenoma cases the prevalence of patients with controlled phase of acromegaly was higher in TSS and TSS+SSA groups if compared to SSA group (43%, 40 and 35 % accordingly). Among NA patients, who started treatment with SSA or underwent TSS the %ULN of IGF-1 was more decreased in TSS group than in SSA group (p<0.05) (from 172 [83.7-238.1] to -22.6[-36.7-23.7]% (p<0.05) and from 227[136-342]% to 30.7[3.0-118.4]%, respectively, (p<0.05)). In group TSS+SSA the %ULN of IGF-1 declined from 158.5 [53.7-215.8]% to 1.4[-11.7-34.5]% accordingly, (p<0.05). The controlled phase of acromegaly in macro- and micro adenoma cases was reached in 40 % and 50% in SSA group, in 57% and 100% in TSS group, respectively, and in 50% in SSA + TSS group.

Conclusion. The preceded TSS lowered IGF1 values more effectively and allowed to reach control of disease if compared to the preceded SSA treatment, especially in macro adenoma cases in acromegalic patients

Rates of acromegaly patient with controlled phase depending on the treatment and the size of adenoma

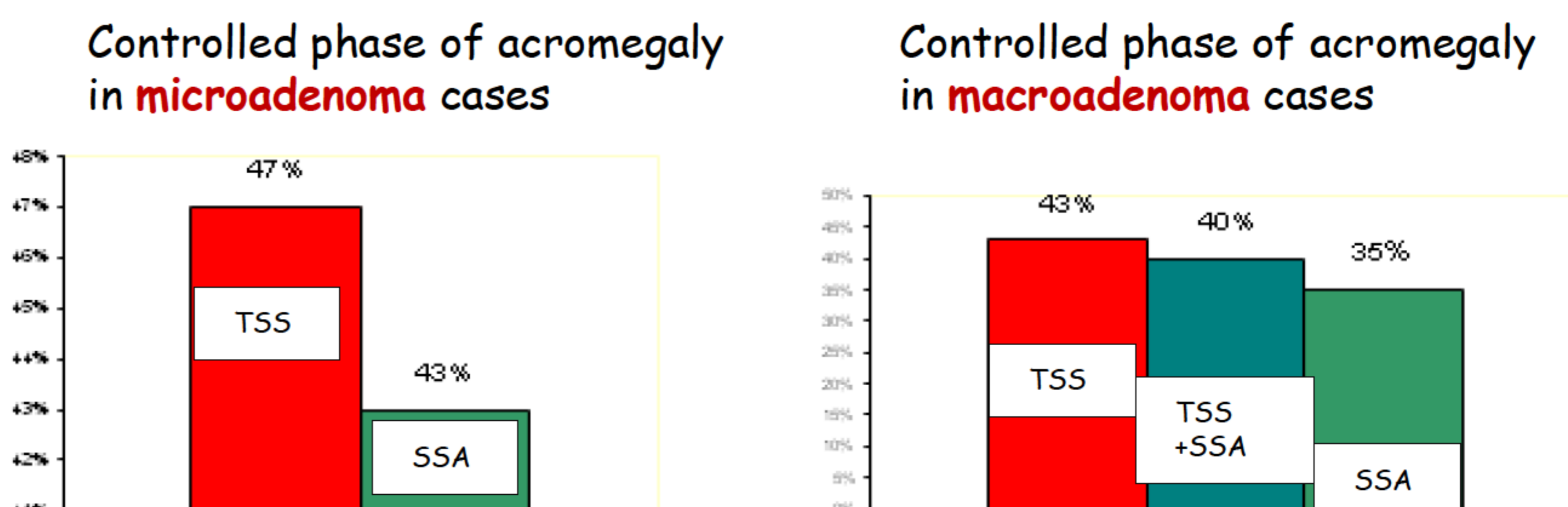


Table. Efficiency transsphenoidal surgery (n=10) and somatostatin analogues (n=24) after 6 month treatment in newly diagnosed

	IGF-1 (%ULN) before and after 6 months of treatment	Controlled phase of acromegaly in microadenoma cases	Controlled phase of acromegaly in macroadenoma cases
TSS		100%	57%
SSA		50%	40%

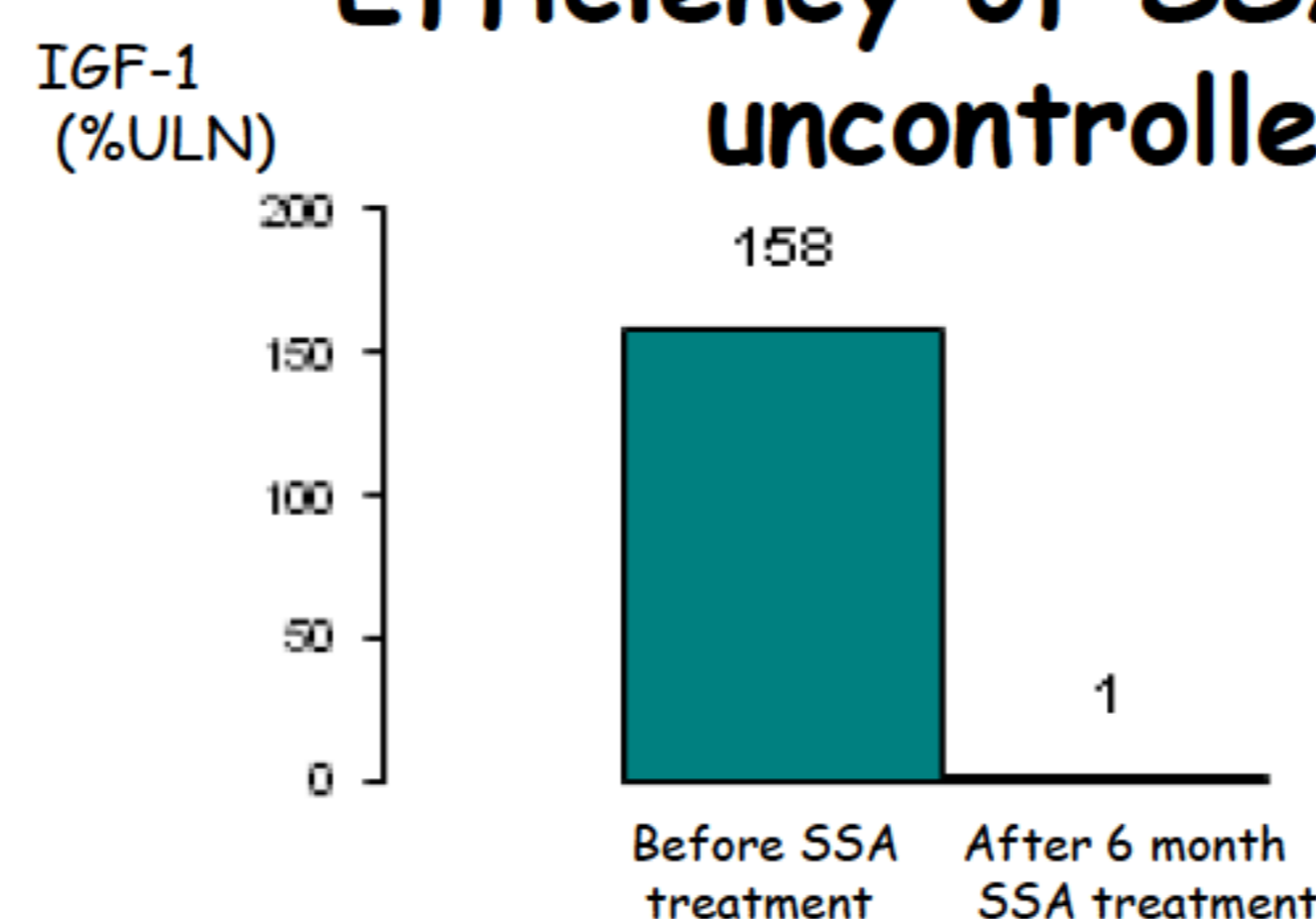
AIM

To access the results of TSS, SSA treatment and their combination in acromegalic patients of Moscow region.

MATERIAL & METHODS

In this study 117 acromegalic patients (25 males and 92 females, 55.0 [IQR 44 - 62] years) were eligible for participation, of whom 34 had newly diagnosed acromegaly (NA group) (macroadenoma (macro)- 80%), 35 primary treated with SSA group (macro - 60%), 29 after TSS group, (macro - 73%), 19 received SSA after TSS (macro - 95%). In 34 NA patients we assessed efficiency after 6 months of SSA treatment (23 patients) (macro -78%) and TSS (10 patients) (macro - 70%). We also assessed efficiency of SSA therapy after 6 months in 10 patients (macro -100%) without control of acromegaly after TSS (SSA+TSS).

Efficiency of SSA therapy in acromegaly patients with uncontrolled acromegaly after TSS (n=10)



Patients with controlled phase of acromegaly - **50%**

CONCLUSION

The preceded TSS lowered IGF1 values more effectively and allowed to reach control of disease if compared to the preceded SSA treatment, especially in macro adenoma cases in acromegalic patients

REFERENCES & CONTACT INFORMATION

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