ASSESSMENT OF BILATERAL INFERIOR PETROSAL SINUS SAMPLING IN THE DIFFERENTIAL DIAGNOSIS OF THE ACTH-DEPENDENT CUSHING'S SYNDROME.

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OBJETIVE

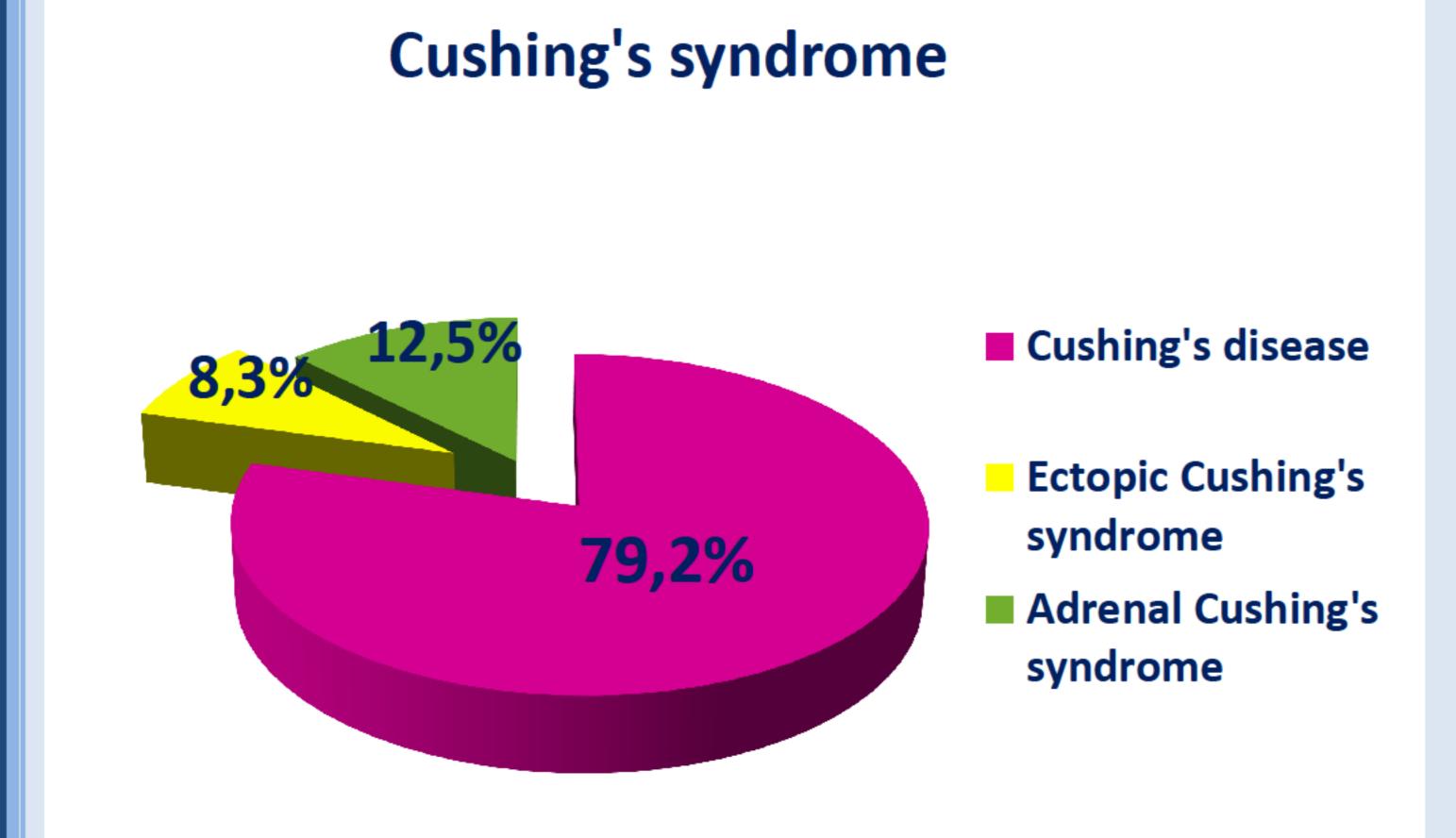
The aim of this study was to assess the diagnostic accuracy of BIPSS with desmopressin stimulation in the differential diagnosis of ACTH-dependent Cushing's syndrome.

PATIENTS AND METHODS

Retrospective study of patients studied to our hospital for diagnosis of ACTH-dependent Cushing's syndrome (2000-2015). The histopathological results in patients who underwent a surgical procedure was considered the reference for statistical study of the accuracy of this technique. Statistical analysis: rates of assessment of diagnostic tests and Cohen's kappa coefficient as a measure of interrater agreement between two observations.

RESULTS

BIPSS was performed in 31 patients, of these, 24 patients were operated



84% of patients with CD had a central positive location in BIPSS (Sensitivity: 0,84, IC 95%: 0.67-1.00)

100% of patients without CD had a negative BIPSS for the central location

(Specificity: 1,00, IC 95%: 1.00-1.00)

100% of patients with BIPSS positive for central location were diagnosed of CD (Positive Predictive Value: 1,00, IC 95%: 1.00-1.00)

63% patients with BIPSS negative for central location weren't diagnosed of CD

(Negative Predictive Value: 0,63, IC 95%: 0,29-0,96)

88% of patients were correctly classified after BIPSS (Efficiency: 0,88, IC 95%: 0,74-1,00)

Good agreement is observed between the location of pituitary magnetic resonance (MRI) or computed tomography (CT) and BIPSS (κ=0,625; p=0,002)

CONCLUSIONS

BIPSS with desmopressin stimulation is useful in the differential diagnosis of ACTH-dependent Cushing's syndrome, and it shows good agreement with imaging tests used.



