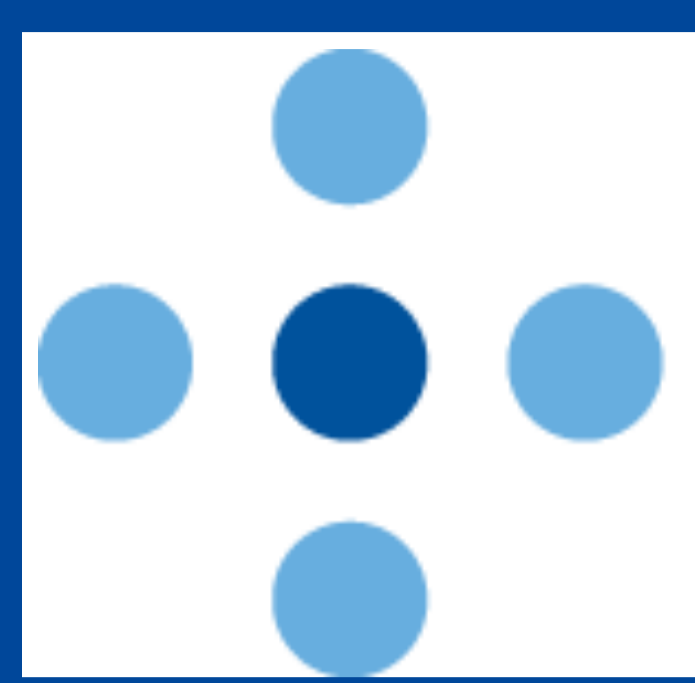


# Comparison of insulin tolerance test and ACTH stimulation test for evaluation of hypocortisolism in patients with acromegaly



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## BACKGROUND

The insulin tolerance test (ITT) is considered the gold standard test for evaluating the ACTH-cortisol axis in patients with pituitary disease. However, the test requires time and personnel resources, and has clear contraindications. Therefore, an ACTH stimulation test (SynACTHen test) is often performed instead.

## OBJECTIVE

To compare the peak cortisol response during ITT and ACTH stimulation test in patients with pituitary disease.

## METHODS

In a total of eight patients with acromegaly, both ITT and an ACTH stimulation test were performed during the same week, but on separate days. A total of 20 comparisons were performed, 5 preoperative and 15 postoperative.

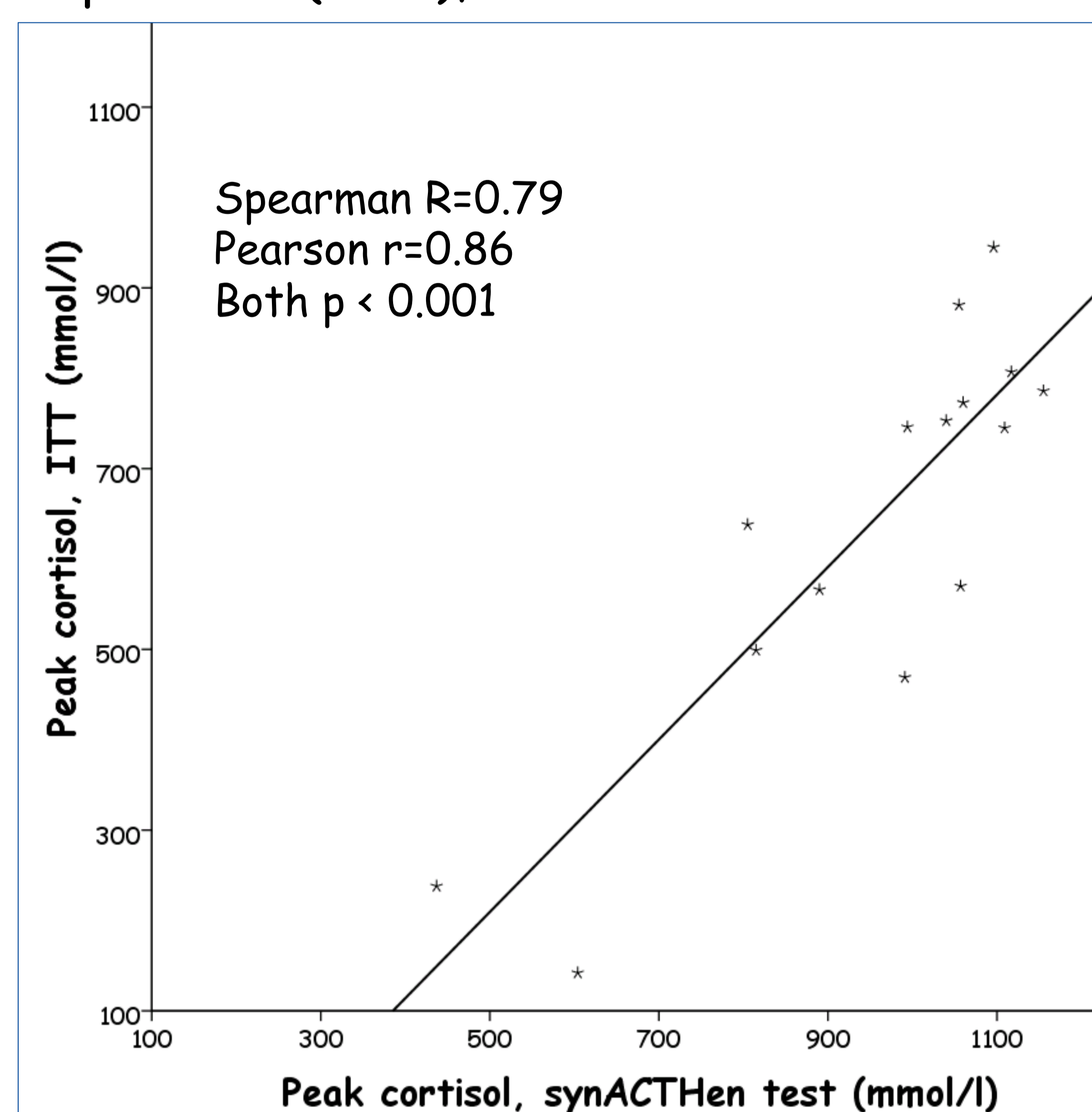
**Table 1.** Peak cortisol (nmol/l) for each test

| Patient | Time of study    | ITT   | SynACTHen test |
|---------|------------------|-------|----------------|
| 1       | 5 years postopr  | 566   | 890            |
| 2       | 5 years postopr  | 746   | 994            |
| 3       | 5 years postopr  | 238 * | 437 *          |
| 4       | 3 months postopr | 881   | 1055           |
|         | 5 years postopr  | 945   | 1096           |
| 5       | First evaluation | 570   | 1057           |
|         | 1 year postopr   | 753   | 1040           |
|         | 5 years postopr  | 638   | 805            |
| 6       | 3 months postopr | 499 * | 815            |
|         | 5 years postopr  | 469 * | 991            |
| 7       | After SMS analog | 745   | 1109           |
|         | 3 months postopr | 807   | 1117           |
|         | 1 year postopr   | 773   | 1060           |
| 8       | First evaluation | 142 * | 604            |

\* Peak cortisol < 550 nmol/l

## RESULTS

Five comparisons were excluded for analyses due to inadequate hypoglycaemia. The remaining 15 comparisons were both preoperative (n=3) and postoperative (n=12), see table 1.



During ITT, peak cortisol level was 637/745 nmol/l (mean/median). Peak cortisol after ACTH stimulation was 948/1040 nmol/l. There was significant correlation between highest plasma cortisol during ITT and ACTH stimulation, see graph.

At ITT, four test displayed peak cortisol <550 nmol/l, of them only one ACTH stimulation test resulted in peak cortisol <550 nmol/l. The discrepant results were pre-treatment, 3 months and 5 years postoperative.

## CONCLUSION

We demonstrate:

- A discrepancy between cortisol response during ITT and ACTH stimulation test
- That ACTH stimulation test leads to a higher peak cortisol level and less often a blunted response when using the same cut-off level.