

Growth hormone carcinoma

A type of [pituitary carcinoma](#)

Asai et al reported a rare case of [GH secreting pituitary neuroendocrine tumor](#) with hematogenous metastasis to the dura mater of the cerebral convexity.

Immunohistological staining was essential to the diagnosis. The histological findings demonstrated that the metastasis was blood-borne. Extensive removal of the tumor and postoperative chemotherapy resulted in partial remission ¹⁾.

Mountcastle et al reported a case of a 56-year-old acromegalic man with cervical lymphatic and spinal metastases from a primary pituitary carcinoma. Elevated basal levels of plasma growth hormone (GH) and insulin growth factor-1/Somatomedin C (IGF-1/SmC) were found. GH levels did not increase after TRH or LHRH administration but decreased after L-Dopa and glucose. Immunostaining of the metastatic tumor for GH and electron microscopy findings confirmed the diagnosis of pituitary GH-secreting carcinoma. Striking clinical improvement and a 46% decrease in plasma GH levels were observed with bromocriptine treatment, although IGF-1/SmC levels increased during therapy. The clinical course of most reported cases of pituitary adenocarcinoma has been one of progressive intracranial expansion of a pituitary neoplasm. In only 25% were metastatic lesions discovered antemortem, and disabling symptomatology caused by metastases was rare. Only four previously reported patients of 36 with pituitary carcinoma had acromegaly ²⁾.

Tanaka T, Kato N, Aoki K, Watanabe M, Arai T, Hasegawa Y, Abe T. Long-term follow-up of growth hormone-producing pituitary carcinoma with multiple spinal metastases following multiple surgeries: case report. *Neurol Med Chir (Tokyo)*. 2013;53(10):707-11. Epub 2013 Sep 27. PubMed PMID: 24077272.

¹⁾

Asai A, Matsutani M, Funada N, Takakura K. Malignant growth hormone-secreting pituitary neuroendocrine tumor with hematogenous dural metastasis: case report. *Neurosurgery*. 1988 Jun;22(6 Pt 1):1091-4. Review. PubMed PMID: 3047593.

²⁾

Mountcastle RB, Roof BS, Mayfield RK, Mordes DB, Sagel J, Biggs PJ, Rawe SE. Pituitary adenocarcinoma in an acromegalic patient: response to bromocriptine and pituitary testing: a review of the literature on 36 cases of pituitary carcinoma. *Am J Med Sci*. 1989 Aug;298(2):109-18. Review. PubMed PMID: 2669475.

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