

Lung cancer pituitary metastases

Case reports

A 62-year-old [woman](#) with [multiple sclerosis](#) and no history of [malignancy](#), [incidentally](#) presented with a diffusely enlarged and homogeneously enhancing [pituitary gland](#) associated with [stalk](#) enlargement. The clinical and biochemical evaluation revealed anterior [hypopituitarism](#) and [diabetes insipidus](#). [Hypophysitis](#) was considered the most likely diagnosis. However, rapid visual deterioration and pituitary growth raised the suspicion of metastatic involvement. A search for systemic malignancy was performed, and CT revealed a [lung](#) mass, which proved to be a [lung adenocarcinoma](#). Accordingly, the patient was started on [immunotherapy](#). Resection of the pituitary lesion was performed, and histopathology analysis revealed metastatic [lung adenocarcinoma](#). Following surgery, the patient underwent [radiotherapy](#). More than 2 years after PM detection, the patient shows a clinically relevant response to antineoplastic therapy and no evidence of PM recurrence ¹⁾.

¹⁾

Lopes AM, Pereira J, Ribeiro I, Martins da Silva A, Queiroga H, Amaral C. Pituitary metastases unveiling a lung adenocarcinoma. *Endocrinol Diabetes Metab Case Rep*. 2021 Feb 26;2021:EDM200211. doi: 10.1530/EDM-20-0211. Epub ahead of print. PMID: 33865234.

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