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Giant pituitary macroadenoma

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Image in medicine

Pituitary macroadenoma is the most common suprasellar lesion in adults. If symptomatic, it is managed surgically via transsphenoidal resection. Patients commonly present with headache and visual disturbances. If the tumour is large enough, it may have mass effect and patient may present with symptoms of elevated intracranial pressure like severe headache, nausea and vomiting. Functional adenomas may cause endocrine dysfunction. Here, we present a case of pituitary macroadenoma in a 62-year-old man presented to the Neurosurgery Department with complaints of headache for 1 month. He also gave history of weight gain in the last 6 months. On examination, bi-temporal hemianopia was present. He was conscious, oriented, and obeying verbal commands. There was no sensory loss or motor

deficits. Cranial nerves were normal and pupils were reactive and magnetic resonance imaging (MRI) of the sella revealed a large pituitary macroadenoma measuring 2.3 cm and left cavernous sinus invasion, with suprasellar extension compressing the optic chiasm, principally to the left of midline discreetly hyper-intense on a T1 weighted image and hyper-intense on a T2 weighted image too (A,B,C,D). Hormonal profile was done, which showed mild elevation of prolactin and decrease in serum thyroid stimulating hormone (TSH). Rest of the hormones (serum cortisol, T3, T4, FSH and LH) were within normal limits. A neurosurgical operation was decided for the patient and she referred for endocrinology consultation.

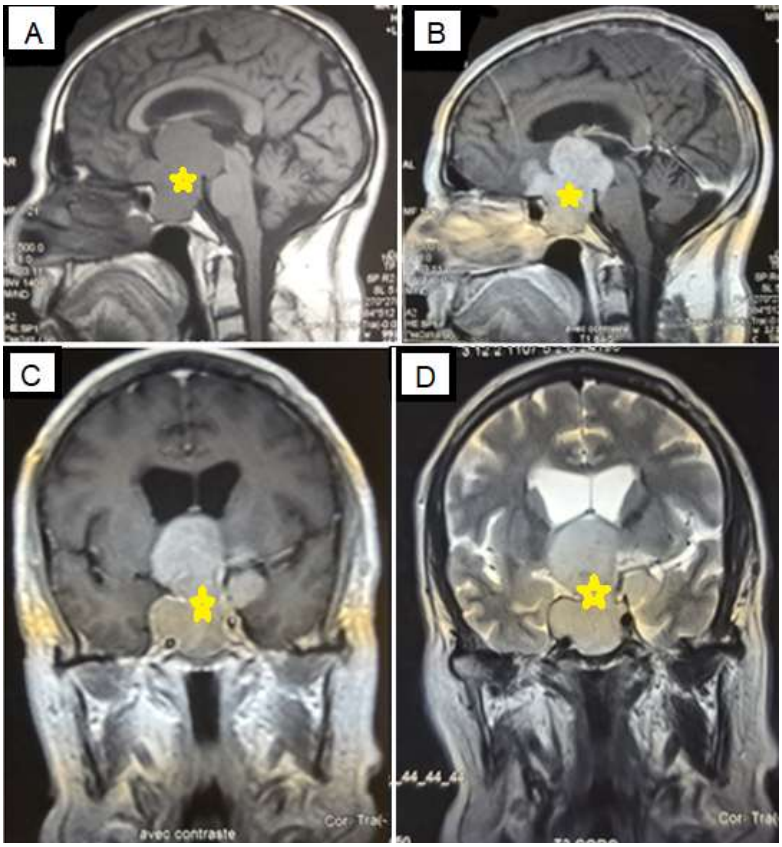

Figure 1: magnetic resonance imaging (MRI) of the sella revealed a large pituitary macroadenoma measuring 6/5/4 cm and left cavernous sinus invasion, with suprasellar extension compressing the optic chiasm, principally to the left of midline. discreetly hypo-intense on a sagittal T1 weighted image (A) and hyper-intense on a T1 sagittal weighted image with gadolinium (B), hyper-intense on a T1 coronal weighted image with gadolinium (C) and hyper-intense on a T2 coronal weighted (D)