Consensus on the diagnosis and treatment of acromegaly

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cromegaly is an insidious disorder caused by a pituitary GH-secreting adenoma resulting in high circulating levels of GH and IGF-I.

Surgery, radiation, and medical treatments are available for lowering GH and IGF-I hypersecretion, controlling pituitary tumor mass effects, and improving morbidity. Recent studies provide a compelling rationale for controlling GH and IGF-I secretion as being the most significant determinant of restoring the observed adverse mortality to control rates.

The therapeutic goals in acromegaly are to eliminate morbidity and to reduce mortality to the expected age- and sex-adjusted rates by using safe treatments that remove the tumor mass or control its growth and restore GH secretion and action to normal. The biochemical goals of therapy are to reduce circulating insulin-like growth factor I (IGF-I) levels to normal for age and sex and to reduce serum GH concentrations to less than $1\,\mu\text{g}/L$ after an oral glucose load.