EPIDEMIOLOGICAL EVALUATION OF 152 PATIENTS WITH CUSHING SYNDROME

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BACKGROUND: Cushing syndrome (CS) is an endocrine condition with potential serious complications if misdiagnosed or untreated. OBJECTIVES: Evaluate epidemiological, clinical and laboratorial findings of CS patients. METHODS: 152 patients were allocated into two different groups based on their diagnoses. ACTH-dependent (AD) included patients with Cushing\'s disease (n=108), ectopic ACTH (n=5) and indeterminated ACTH-dependent (n=4). By the other hand, ACTH-independent (AI), was formed by adrenal carcinoma (n=16), adrenal adenoma (n=17) and pigmented nodular adrenal hyperplasia (n=2). Analyses were based on sex, age, comorbidities, ACTH level and urinary free cortisol/24h (UFC) volume. RESULTS: AD group had 117 patients and AI group included 35. There were 74,4% (n=87) women in the first and 77,1% (n=27) in the second (p=0.439). Stratifyed by groups of age at the moment of diagnosis, there was no significant difference between (p=0.335). Comorbidities analyses such as hypertension, abnormal glucose, psychiatric disorders and heart diseases showed no statistical significance between them. The median of ACTH level was 60 pg/mL (39.1 – 87) in AD and 10 pg/ml (9 – 10) in AI (p<0.001). Furthermore, medians of UFC levels were almost equal [355 µg/dL (187.5 – 631.73); 354.53 µg/dL (158 – 1033.75); p=0.732]. CONCLUSION: The significant values of ACTH levels found in the two analyzed groups are explained by the physiology of CS. Our database research showed no statistical difference between the other variables evaluated; reassuring that CS diagnosis need a series of laboratorial and images data to solve the etiology paradigm.