

The German Acromegaly Register – Surgical outcome in 400 patients

Background: Treatment results for acromegaly remain unsatisfactory. Publications from experienced centres may not represent the overall situation.

Objective: The German Acromegaly Register (expected number of pts=5000 until 2013) documents diagnostic/therapeutic effectiveness, comorbidity/ mortality, compares experienced with not-experienced centres, extracts suggestions for improvement.

Methods: Two trained nurses visit all centres. Software of the UK Acromegaly Database is used.

Results: 502 patients from 18 centres entered as of Dec. 2003. Surgical results from 400 operated pts are reported (incomplete data from early time periods n=119). Basal, 1 and 3 yrs post-surgery GH/IGF-I data are given (Table). 3-yr data include secondary/tertiary treatment with repeat surgery (n=71), medical treatment (n=181), irradiation (n=68). Operative results improved during consecutive time periods, but cure rate did not surpass 54%. Secondary treatment offered little further improvement. Presurgical medical treatment (n=117) reduced GH less than surgery (39.6 -> 13.7 μ L).

Time period of surgery		<Dec. 1983	1984–1992	1993-present
GH (median, n)	Pre-OP	30.4 (10)	23.0 (45)	13.7 (226)
	1 yr	13.0 (10)	3.7 (33)	2.4 (189)
	3 yrs	8.0 (8)	2.4 (26)	2.2 (51)
GH/oGTT <1.0 μ g/L (%, n/n)	1 yr	43% (3/7)	50% (10/20)	54% (49/91)
	3 yrs	40% (2/5)	67% (10/15)	63% (19/30)
IGF-I normal and oGTT GH <1.0 μ L	1 yr	no data	20% (4/20)	38% (35/91)
	3 yrs	no data	40% (6/15)	60% (18/30)
Random GH <2.5 μ g/L (%, n/n)	1 yr	0% (0/0)	25% (5/20)	63% (53/94)
	3 yrs	0% (0/3)	44% (7/16)	67% (39/58)

Conclusions: Analysis of epidemiological data will be useful for improved diagnostic and therapeutic strategies.

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