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Pituitary incidentaloma

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Abstract

Pituitary incidentalomas (PI) are lesions of the pituitary region discovered fortuitously by imaging for reasons unrelated to pituitary disease. They range from small cysts to large invasive adenomas. All over the world, improvements in the quality and availability of radiological examinations are leading to an increase in the discovery of PI. In the last four decades, significant advances have been made in the understanding of PI. Autopsy studies have shown that about 10% of deceased individuals harbour a PI, most often a non-functioning microadenoma. In contrast, modern patient series showed that among PIs that come to endocrinological attention, a significant proportion are macroadenomas, and many patients suffer from asymptomatic or pauci-symptomatic endocrine or ophthalmologic disturbances. Other than adenomas, empty sella, Rathke's cleft cyst, craniopharyngioma and meningioma are the most frequent types of PIs. About 10% of micro-incidentalomas and 25% of macro-incidentalomas grow over time. Most cases can be managed conservatively by mere surveillance. Follow-up is necessary in all patients with macroadenoma, but uncertainty remains for microadenomas as to the extent of endocrinological work-up as well as the necessity and duration of follow-up. Visual and endocrine anomalies constitute the most common indications for surgery. When needed, surgery yields better outcome in PIs than in symptomatic pituitary lesions. © 2021 Elsevier Masson SAS

Author Keywords

Incidental pituitary lesion; Pituitary adenoma; Pituitary incidentaloma

Index Keywords

autopsy, craniopharyngioma, empty sella syndrome, human, macroadenoma, meningioma, nuclear magnetic resonance imaging, pituitary incidentaloma, Rathke cleft cyst, Short Survey, adenoma, adult, brain cyst, child, cyst, diagnostic imaging, hypophysis tumor, incidental finding, pathology; Adenoma, Adult, Autopsy, Central Nervous System Cysts, Child, Craniopharyngioma, Cysts, Humans, Incidental Findings, Meningioma, Pituitary Neoplasms

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