### Background:
Management of pituitary conditions is notoriously difficult and patients often experience high levels of distress which are often not addressed by health professionals. As a result, pituitary conditions have been found to have a large negative impact on quality of life. The aims of this study were 1) to identify the psychosocial symptoms associated with pituitary conditions, and 2) to identify any differences in symptomatology across different pituitary conditions, age ranges and gender.

### Methods:
A questionnaire was completed by 1062 members of the Pituitary Foundation (683 female, aged under 18 to over 65). With a format based on the Cancerbackup Survey (2006), the questionnaire was designed using material from the Pituitary Foundation Needs Analysis report (2006) and some relevant questions from other validated questionnaires. Respondents completed either a pen and paper version or went online to survey monkey.

### Results:
Participants: A questionnaire was sent to 2,000 members of the Pituitary Foundation. Of the total sample approached, 1062 responded, a response rate of 53%. 683 respondents were female and 366 were male (13 unknown), with an age range of under 18 years of age to over 65.

Patients had a range of pituitary conditions including hypopituitarism (473), diabetes insipidus (183), non-functioning tumour (170), acromegaly (138), prolactinoma (123), Cushing’s disease (98), craniohypophysectomy (64), hypergonadism (367) and Sheehan’s syndrome (14).

### Design:
The questionnaire was designed using material from a needs analysis of pituitary patients and relevant questions taken from other validated questionnaires. The format was based upon the Cancerbackup survey (2006)².

### Conclusions:
Participants were found to be experiencing a range of debilitating psychosocial and physical symptoms that were impairing long term functioning. These symptoms need further support in terms of patient information, advice and condition management.

### Objectives
Management of Pituitary conditions is notoriously difficult and patients often experience high levels of distress which are often not addressed by health professionals ¹. As a result, pituitary conditions have been found to have a large negative impact on quality of life ¹.

Part of the difficulty in understanding the effect pituitary conditions can have on patients is the lack of research looking at the needs of patients with pituitary conditions and how they manage their care ². Further research is needed to identify the extent of the psychosocial needs of patients by mapping symptoms associated with poor quality of life and identifying any differences in presentation across pituitary conditions.

### Aims:
This study had the following aims: 1) identify the psychosocial symptoms associated with pituitary conditions, and 2) identify any differences in symptomatology across different pituitary conditions, age ranges and gender.

The survey identified difficulties with physical pain, extreme fatigue and fluctuating mood. Half of participants identified that their condition had affected their ability to work and reduced their fertility. Participants also highlighted increased levels of anxiety and depression and changes in appearance. Other psychosocial issues included poor quality of sleep and poor sex life.

Regression analyses showed infertility was associated with younger patients \( r^2 = -0.207 \), \( p < 0.001 \), and those with hypopituitarism \( r^2 = 0.164 \), \( p < 0.001 \) or prolactinoma \( r^2 = 0.117 \), \( p < 0.001 \).

Headaches were associated with younger patients \( r^2 = -0.165 \), \( p < 0.001 \), female patients \( r^2 = 0.128 \), \( p < 0.001 \), and those with prolactinoma \( r^2 = 0.159 \), \( p < 0.001 \), Diabetes Insipidus \( r^2 = 0.083 \), \( p < 0.01 \), acromegaly \( r^2 = 0.063 \), \( p < 0.05 \) and hypogonadism \( r^2 = 0.074 \), \( p < 0.05 \).

Poor satisfaction with the quality of sex life was associated with male patients \( r^2 = 0.112 \), \( p < 0.001 \), and those with prolactinoma \( r^2 = 0.068 \), \( p < 0.05 \).

### Conclusions
Pituitary conditions have a negative impact on quality of life. Participants were found to be experiencing a range of debilitating psychosocial and physical symptoms that were impairing long term functioning.

These symptoms need further support in terms of patient information, advice and condition management.

### References