

Navigating the Clinical Variability of Cushing's Disease

Cushing's disease (CD) is the most common form of endogenous Cushing's syndrome¹

Cause of Cushing's disease: an adrenocorticotropic hormone (ACTH)-secreting pituitary adenoma that stimulates the adrenal glands to overproduce cortisol²

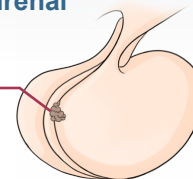
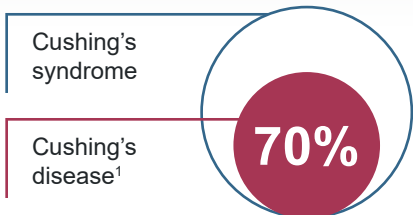
Epidemiology:

At least 3 times more prevalent in women than in men¹

Incidence
1.2–2.4 cases per million per year²

Prevalence
~39 cases per million²

Average age at diagnosis⁴ ♀ **30.5** years ♂ **37.1** years



Pituitary gland

20–50%

of patients with CD have a pituitary tumor that is not visible on conventional MRI³

The presentation of CD is variable; not all patients present with a typical Cushingoid appearance¹

Clinical signs of CD¹

Easy bruising

Facial plethora

Osteoporosis

Proximal myopathy

Skin thinness

Striae



Fatigue

Uncontrolled diabetes

Hypertension

Rapid weight gain

Patients with CD may have a wide variety of clinical manifestations and overall, an impaired quality of life⁵

Other clinical manifestations^{5,6}

- Acne⁶
- Cognitive impairment⁵
- Decreased libido⁶
- Hypercoagulopathy⁵
- Menstrual abnormalities⁶
- Pain⁶
- Reduced concentration and impaired memory⁵
- Sleep disturbance⁶
- Sexual disturbance⁵
- Type 2 diabetes (including insulin resistance and impaired glucose tolerance)⁵

Patients with unusual symptoms for their age (eg, osteoporosis, uncontrolled hypertension), with multiple and progressive symptoms should be screened for hypercortisolism.⁷

This broad range of clinical manifestations can make diagnosis challenging⁶

Average number of physicians consulted before diagnosis⁶



Average time to diagnosis⁶

3.8 years

CD is associated with increased morbidity and mortality, highlighting the importance of normalizing cortisol levels⁵

Standard mortality ratio²

1.7–4.8

When hypercortisolism is untreated or uncontrolled, comorbidities such as cardiovascular disease, neuropsychiatric illnesses, and metabolic syndrome may result⁵



23%

Deaths in patients with CD caused by cardiovascular disease²



54–81%

of patients with CD have depression and generalized anxiety disorders¹



30–60%

of patients with CD have metabolic complications²

Clinical signs of Cushing's disease vary greatly between patients¹; consider what types of patients you have that may need testing for Cushing's disease.

CD, Cushing's disease; MRI, magnetic resonance imaging.

1. Pivonello R et al. *Endocr Rev.* 2015;36:385-486. 2. Feelders RA et al. *Eur J Endocrinol.* 2012;167:311-326. 3. Patronas N et al. *J Clin Endocrinol Metab.* 2003;88(4):1565-1569. 4. Lonser RR et al. *J Neurosurg.* 2017;126(2):404-417. 5. Pivonello R et al. *Endocrine.* 2017;56:10-18. 6. Kreitschmann-Andermahr I et al. *Eur J Endocrinol.* 2015;172:285. 7. Braun LT et al. *J Clin Endocrinol Metab.* 2022;107(9):e3723-e3730.