FORMATO EUROPEO PER IL CURRICULUM VITAE

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Date (da - a)	19/06/1996 -
Nome e indirizzo del datore di lavoro	UNIVERSITÀ DI MESSINA.
Tipo di azienda o settore	ISTRUZIONE
Tipo di impiego	PROFESSORE ORDINARIO DI ENDOCRINOLOGIA
Principali mansioni e responsabilità	

	DIDATTICA, RICERCA, ASSISTENZA SPECIALISTICA IN CAMPO ENDOCRINOLOGICO. DIRETTORE DELLA UOC DI ENDOCRINOLOGIA. RESPONSABILE DEL CENTRO DI RIFERIMENTO REGIONALE PER LE MALATTIE RARE DELLE GHIANDOLE ENDOCRINE. COORDINATORE NAZIONALE DELLA SEZIONE DELLE MALATTIE IPOTALAMO-IPOFISARIE DELLA SOCIETÀ ITALIANA DI ENDOCRINOLOGIA
Date (da - a)	01/01/1992 - 18/06/1996
Nome e indirizzo del datore di lavoro	ASL 5 - SICILIA.
Tipo di azienda o settore	SANITÀ
Tipo di impiego	SPECIALISTA IN ENDOCRINOLOGIA
Principali mansioni e responsabilità	SPECIALISTA AMBULATORIALE - ENDOCRINOLOGIA

ISTRUZIONE E FORMAZIONE

Date (da - a)	05/11/1982 - 26/11/1985
Nome e tipo di istituto di istruzione o formazione	UNIVERSITA' DI CATANIA, CATANIA - ITALIA
Titolo di Studio	SPEC.NE IN ENDOCRINOLOGIA
Qualifica conseguita	SPECIALISTA IN ENDOCRINOLOGIA
Livello nella classificazione nazionale	50/50 CON LODE
Date (da - a)	01/11/1976 - 19/07/1982
Nome e tipo di istituto di istruzione o formazione	UNIVERSITA' DI MESSINA, MESSINA - ITALIA
Titolo di Studio	LAUREA IN MEDICINA E CHIRURGIA
Qualifica conseguita	DOTTORE IN MEDICINA E CHIRURGIA
Livello nella classificazione nazionale	110/110 CON LODE

Date (da - a)	- 30/07/1976
Nome e tipo di istituto di istruzione o formazione	LICEO CLASSICO FRANCESCO MAUROLICO, MESSINA - ITALIA
Titolo di Studio	MATURITA' CLASSICA
Qualifica conseguita	
Livello nella classificazione nazionale	50/60

PUBBLICAZIONI

Titolo	LIPOATROPHY IN GH DEFICIENT PATIENTS TREATED WITH A LONG-ACTING PEGYLATED GH.
Autori	TOURAINE P, D'SOUZA GA, KOURIDES I, ABS R, BARCLAY P, XIE R, PICO A, TORRES-VELA E, EKMAN B; GH LIPOATROPHY STUDY GROUP.
Abstract	OBJECTIVE: CHANGES OBSERVED DURING ADULT GH DEFICIENCY (GHD) ARE MOST OFTEN REVERSED WITH THE ADMINISTRATION OF RECOMBINANT HUMAN GH (RHGH). TO AVOID DAILY INJECTIONS, A LONG-ACTING GH MOLECULE HAS BEEN OBTAINED BY COVALENT BINDING OF POLYETHYLENE GLYCOL (PEG) WITH RHGH (PEG-GH), ALLOWING WEEKLY S.C. INJECTIONS. THIS STUDY WAS DESIGNED TO ASSESS ITS EFFICACY AND SAFETY, IN ADULT GHD SUBJECTS. DESIGN AND METHODS: THIS WAS A RANDOMIZED, DOUBLE-BLIND, PLACEBO-CONTROLLED, MULTIPLE-DOSE, PARALLEL GROUP STUDY. SUBJECTS WERE RECRUITED FROM 34 CENTERS. A TOTAL OF 105 SUBJECTS WITH GHD WERE ASSIGNED A TREATMENT. THEY RECEIVED 6 WEEKLY INJECTIONS OF EITHER PEG-GH OR PLACEBO. SUBJECTS WERE RANDOMIZED INTO ONE OUT OF FOUR TREATMENT GROUPS (GROUPS A-D) OR PLACEBO (GROUP E). GROUPS A, B, AND C RECEIVED 1, 3, AND 4 MG PEG-GH RESPECTIVELY, FOR THE FIRST 3 WEEKS FOLLOWED BY 2, 6, AND 8 MG PEG-GH RESPECTIVELY, FOR THE REMAINING 3 WEEKS. GROUP D RECEIVED 4 MG PEG-GH FOR 6 WEEKS. GROUP E RECEIVED PLACEBO. THE STUDY WAS SUSPENDED BECAUSE OF THE DEVELOPMENT OF LIPOATROPHY IN CERTAIN SUBJECTS AND RESTARTED WITH AN INJECTION ROTATION PLAN, BEFORE BEING TERMINATED DUE TO FURTHER SUBJECTS DEVELOPING LIPOATROPHY. RESULTS: A TOTAL OF 13 CASES OF INJECTION-SITE LIPOATROPHY WERE REPORTED, OF WHICH TEN WERE IN FEMALES AND THREE OCCURRED AFTER THE FIRST INJECTION; ALL CASES WERE INDEPENDENT OF PEG-GH DOSE OR IGF1 LEVELS, EITHER BASAL OR UNDER TREATMENT. CONCLUSION: THE UNPREDICTABLE OCCURRENCE OF INJECTION-SITE LIPOATROPHY WITH WEEKLY LONG-ACTING PEGYLATED GH MOLECULES MAY BE A LIMITING FACTOR FOR THEIR DEVELOPMENT.
Anno pubblicazione e riferimenti	EUR J ENDOCRINOL. 2009 OCT;161(4):533-40. EPUB 2009 AUG 4. ANNO: 2009 - ISBN:

Titolo	DISSOCIATED RESPONSIVENESS OF A GH- AND TSH-SECRETING PITUITARY ADENOMA TO OCTREOTIDE-LAR THERAPY: THE INTRIGUING CASE OF MISTER B.
Autori	CURTÒ L, RAGONESE M, LOSA M, TRIMARCHI F, CANNAVÒ S.
Abstract	
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2009 JUL 17. ANNO: 2009 - ISBN:
Titolo	UNUSUAL ENDOCRINE AND SOMATIC PHENOTYPIC ABNORMALITIES IN A 14-YR-OLD BOY WITH CLASSIC KLINEFELTER SYNDROME (47, XXY).
Autori	CURTÒ L, MESSINA MF, TRIMARCHI F, CANNAVÒ S.
Abstract	
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2009 JUN 18. ANNO: 2009 - ISBN:
Titolo	UNUSUAL MRI FINDING IN A MALE WITH LYMPHOCYTIC HYPOPHYSITIS MIMICKING A PITUITARY TUMOUR.
Autori	CURTÒ L, GRANATA F, TORRE ML, TRIMARCHI F, CANNAVÒ S.
Abstract	
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2009 MAY 12. ANNO: 2009 - ISBN:
Titolo	HIGH-DOSE INTRAMUSCULAR OCTREOTIDE IN PATIENTS WITH ACROMEGALY INADEQUATELY CONTROLLED ON CONVENTIONAL SOMATOSTATIN ANALOGUE THERAPY: A RANDOMISED CONTROLLED TRIAL.
Autori	GIUSTINA A, BONADONNA S, BUGARI G, COLAO A, COZZI R, CANNAVO S, DE MARINIS L, DEGLI UBERTI E, BOGAZZI F, MAZZIOTTI G, MINUTO F, MONTINI M, GHIGO E.
Abstract	OBJECTIVE: IN ACROMEGALY, 25-50% OF PATIENTS RESPOND INADEQUATELY TO CONVENTIONAL LONG-ACTING SOMATOSTATIN ANALOGUE (SSA) THERAPY. RESPONSE MAY BE IMPROVED BY INCREASING SSA FREQUENCY OR

	DOSE. THIS STUDY EVALUATED THE BIOCHEMICAL EFFICACY AND SAFETY OF HIGH-DOSE OCTREOTIDE IN PATIENTS WITH ACROMEGALY. DESIGN: A 24-WEEK PROSPECTIVE, MULTICENTRE, RANDOMISED, OPEN-LABEL TRIAL CONDUCTED FROM 12 DECEMBER 2005 TO 23 OCTOBER 2007 IN PATIENTS WITH PERSISTENTLY UNCONTROLLED ACROMEGALY DESPITE > OR =6 MONTH CONVENTIONAL SSA THERAPY. METHODS: PATIENTS WITH > OR =50% REDUCTION IN GH LEVELS DURING PREVIOUS SSA TREATMENT WERE RANDOMISED TO HIGH-DOSE (60 MG/28 DAYS) OR HIGH-FREQUENCY (30 MG/21 DAYS) OCTREOTIDE I.M. INJECTION. PRIMARY END-POINTS WERE WEEK 12 AND 24 REDUCTION IN SERUM IGF1 AND GH FROM BASELINE. SECONDARY END POINTS INCLUDED IGF1 NORMALISATION AND TUMOUR SHRINKAGE RATES, AND SAFETY/TOLERABILITY EVALUATIONS. RESULTS: SIGNIFICANTLY, MORE PATIENTS (10 OUT OF 11) ACHIEVED WEEK 24 IGF1 REDUCTION IN THE HIGH-DOSE THAN THE HIGH-FREQUENCY GROUP (8 OUT OF 15; P<0.05). IN THE HIGH-DOSE GROUP ONLY, WEEK-24 IGF1 VALUES WERE SIGNIFICANTLY REDUCED (P=0.02) VERSUS BASELINE. NORMALISATION OF IGF1 OCCURRED ONLY WITH THE HIGH-DOSE REGIMEN (4/11; P=0.02). OUT OF 14 PATIENTS EXPERIENCING ADVERSE EVENTS, 5 REPORTED DRUG-RELATED GASTROINTESTINAL EFFECTS. NO DOSE-RESPONSE RELATIONSHIP WAS SEEN. SAFETY PARAMETERS WERE SIMILAR BETWEEN TREATMENT GROUPS, APART FROM A SLIGHT DECREASE IN HBA1C IN THE HIGH-DOSE GROUP ONLY. CONCLUSION: HIGH-DOSE OCTREOTIDE TREATMENT IS SAFE AND EFFECTIVE (NORMALISATION OF IGF1 LEVELS) IN A SUBSET OF PATIENTS WITH ACTIVE ACROMEGALY INADEQUATELY CONTROLLED WITH LONG-TERM SSA. INDIVIDUALISED OCTREOTIDE DOSES UP TO 60 MG/28 DAYS MAY IMPROVE OUTCOMES OF SSA THERAPY.
Anno pubblicazione e riferimenti	EUR J ENDOCRINOL. 2009 AUG;161(2):331-8. EPUB 2009 MAY 22. ANNO: 2009 - ISBN:
Titolo	CONFIRMATION OF LOCAL AMINO ACID SEQUENCE HOMOLOGY BETWEEN HUMAN PROLACTIN AND THE AMYLOID-RELATED PROTEINS.
Autori	BENVENGA S, CANNAVÒ S, TRIMARCHI F, GUARNERI F.
Abstract	
Anno pubblicazione e riferimenti	PITUITARY. 2009:12(4):368-70. ANNO: 2009 - ISBN:
Titolo	SUBCUTANEOUS LIPOATROPHY INDUCED BY LONG-TERM PEGVISOMANT ADMINISTRATION.
Autori	CANNAVO S, ROMANELLO G, CAVALLARI V, SCISCA C, CANNAVO SP.
Abstract	
Anno pubblicazione e riferimenti	CLIN ENDOCRINOL (OXF). 2009 APR;70(4):655-6. EPUB 2008 SEP 2. ANNO: 2009 - ISBN:

Titolo	NON-FUNCTIONING PITUITARY ADENOMAS INFREQUENTLY HARBOR G-PROTEIN GENE MUTATIONS.
Autori	RUGGERI RM, SANTARPIA L, CURTÒ L, TORRE ML, GALATIOTO M, GALATIOTO S, TRIMARCHI F, CANNAVÒ S.
Abstract	BACKGROUND: MUTATIONS OF THE GENES ENCODING THE ALPHA SUBUNIT OF THE STIMULATORY G PROTEIN (GS) AND OF THE INHIBITING GI2 PROTEIN (GNAS1 AND GNAI2 GENES, RESPECTIVELY) HAVE BEEN DESCRIBED IN VARIOUS ENDOCRINE NEOPLASIAS, INCLUDING PITUITARY TUMORS. AIM: TO SEARCH FOR MUTATIONS OF GNAS1 AND GNAI2 IN A CONTINUOUS SERIES OF NON-FUNCTIONING PITUITARY ADENOMA (NFPA) PATIENTS NEUROSURGICALLY TREATED. SUBJECTS AND METHODS: THE SURGICAL SAMPLES OF 22 PATIENTS WHO HAVE BEEN DEFINED AND CHARACTERIZED ON A CLINICAL, BIOCHEMICAL, HISTOLOGICAL, AND IMMUNOHISTOCHEMICAL POINT OF VIEW HAVE BEEN PROCESSED FOR INVESTIGATING THE PRESENCE OF THE ABOVE MUTATIONS BY PCR AMPLIFICATION OF THE HOT SPOTS EXONS 8 AND 9 OF GNAS1, AND EXONS 5 AND 6 OF GNAI2, FOLLOWED BY DIRECT SEQUENCING. MOREOVER, THE PROMOTER REGION OF GNAI2, IN ORDER TO ASSESS THE PREVALENCE OF SINGLE NUCLEOTIDE POLYMORPHISMS (SNP), WAS INVESTIGATED IN THE SAME SERIES. RESULTS: A CGT>TGT MUTATION AT CODON 201 OF GNAS1 GENE IN A SINGLE CASE OF NFPA WAS FOUND, BUT NO MUTATION OF GNAI2A WAS DEMONSTRATED. CONCLUSIONS: THIS FINDING SUGGESTS AND CONFIRMS THAT G-PROTEIN MUTATIONS ARE RARE AND NOT CRUCIAL IN NFPA DEVELOPMENT. ADDITIONALLY, WE FOUND A SILENT SNP AT CODON 318 IN THE PROMOTER OF THE GI2ALPHA GENE IN ONE OUT OF THE 22 NFPA.
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2008 NOV;31(11):946-9. ANNO: 2008 - ISBN:
Titolo	PATIENTS WITH CRANIOPHARYNGIOMAS: THERAPEUTICAL DIFFICULTIES WITH GROWTH HORMONE.
Autori	CANNAVÒ S, MARINI F, TRIMARCHI F.
Abstract	CRANIOPHARYNGIOMA (CP) IS A RARE AND BENIGN TUMOR OF THE PITUITARY REGION. IT IS THE SECOND CAUSE OF HYPOPITUITARISM IN CHILDREN AND THE THIRD IN ADULTS. MULTIPLE PITUITARY DEFICIENCIES OR PANHYPOPITUITARISM AND DIABETES INSIPIDUS ARE VERY FREQUENT AND THEIR PREVALENCE INCREASES SIGNIFICANTLY AFTER NEUROSURGERY. IN PATIENTS WITH GH DEFICIENCY (GHD), RECOMBINANT GH (RGH) REPLACEMENT IS RECOMMENDED, AFTER A NEAR COMPLETE SURGICAL EXCISION OF CP AND EXCLUSION OF TUMOR PROGRESSION. THE RISK OF CP RECURRENCE OR PROGRESSION DUE TO RGH THERAPY IS UNPROVEN. TREATMENT WITH RGH IMPROVES SIGNIFICANTLY THE QUALITY OF LIFE (QOL), ALTHOUGH BODY COMPOSITION AND LIPID ABNORMALITIES ARE NOT MODIFIED. AT THE DATA LOCK 2003, IN THE HYPOPITUITARY CONTROL AND COMPLICATIONS STUDY (HYPOCCS) ITALIAN DATABASE 90 PATIENTS WITH CP WERE INCLUDED. ADULTHOOD ONSET (AO) HYPOPITUITARISM HAD BEEN DIAGNOSED IN TWO/THIRDS OF THEM. THEY HAD WORSE QOL THAN THEIR CHILDHOOD ONSET (CO)-COUNTERPART. DURING 3-YR RGH TREATMENT MEAN BODY MASS INDEX, FAT MASS PERCENTAGE, AND BOTH HIP AND WAIST CIRCUMFERENCES DECREASED SIGNIFICANTLY ONLY IN CO PATIENTS. ACCORDINGLY, TOTAL CHOLESTEROL AND TRIGLYCERIDES DECREASED, AND HDL-CHOLESTEROL INCREASED SIGNIFICANTLY IN CO- BUT NOT IN AO-PATIENTS. ANALYSIS OF DOSE TITRATION SHOWED THAT CO-WERE TREATED WITH HIGHER RGH DOSES THAN AO-PATIENTS.

Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2008 SEP;31(9 SUPPL):56-60. ANNO: 2008 - ISBN:
Titolo	ASSESSMENT OF THE AWARENESS AND MANAGEMENT OF CARDIOVASCULAR COMPLICATIONS OF ACROMEGALY IN ITALY. THE COM.E.T.A. (COMORBIDITIES EVALUATION AND TREATMENT IN ACROMEGALY) STUDY.
Autori	GIUSTINA A, MANCINI T, BOSCANI PF, DE MENIS E, DEGLI UBERTI E, GHIGO E, MARTINO E, MINUTO F, COLAO A; COM.E.T.A. (COMORBIDITIES EVALUATION AND TREATMENT INACROMEGALY) ITALIAN STUDY GROUP.
Abstract	BACKGROUND: DURING THE COURSE OF ACROMEGALY, CARDIOVASCULAR, RESPIRATORY, AND METABOLIC CO-MORBIDITIES CONTRIBUTE TO ENHANCED MORTALITY. IN 2002, THE PITUITARY SOCIETY AND THE EUROPEAN NEUROENDOCRINE ASSOCIATION SPONSORED A CONSENSUS WORKSHOP IN VERSAILLES DURING WHICH GUIDELINES FOR DIAGNOSIS AND TREATMENT OF CO-MORBIDITIES IN ACROMEGALY WERE DEFINED. HOWEVER, AS FOR OTHER GUIDELINES PREVIOUSLY ISSUED IN THE FIELD, NO DATA ARE AVAILABLE ON THEIR CLINICAL APPLICATION. AIM: THE AIM OF THIS WORK COORDINATED BY THE ITALIAN STUDY GROUP ON CO-MORBIDITIES EVALUATION AND TREATMENT IN ACROMEGALY (COM.E.T.A.) WAS TO ASSESS, ON A NATIONAL BASIS, THE APPLICATION IN THE CLINICAL PRACTICE OF THE VERSAILLES CRITERIA FOR DIAGNOSIS AND TREATMENT OF CARDIOVASCULAR COMORBITIES IN ACROMEGALY. MATERIALS AND METHODS: IN JANUARY 2007 AN AD HOC DESIGNED QUESTIONNAIRE WAS SENT BY MAIL TO 130 ENDOCRINE CENTERS IN ITALY. RESULTS: THE GUIDELINES HAVE BEEN GENERALLY WELL PERCEIVED AND TRANSLATED IN CLINICAL PRACTICE. SPECIFICALLY: 1) ECHOCARDIOGRAPHY IS CONSIDERED THE MAINSTAY FOR THE DIAGNOSIS AND FOLLOW-UP; 2) AMBULATORY BLOOD PRESSURE MONITORING AND BLOOD LIPID ASSESSMENT ARE PERFORMED IN MOST HYPERTENSIVE PATIENTS; 3) MOST ENDOCRINOLOGISTS DIRECTLY MANAGE HYPERTENSION AND ARE AWARE OF THE UNCERTAINTY OF THE EFFECT OF THE CONTROL OF THE DISEASE ON BLOOD PRESSURE LEVELS; 4) ACE INHIBITORS AND ANGIOTENSIN RECEPTORS BLOCKERS ARE FIRST-CHOICE ANTI-HYPERTENSIVE TREATMENT; 5) APPROXIMATELY HALF OF THE CENTERS CONSIDER SOMATOSTATIN ANALOGUES OF PARAMOUNT RELEVANCE FOR BIOCHEMICAL CONTROL OF DISEASE; 6) AWARENESS THAT LEFT VENTRICULAR HYPERTROPHY AND HEART FAILURE ARE THE MOST RELEVANT CARDIOVASCULAR COMPLICATIONS IS HIGH ALTHOUGH THE IMPACT OF ISCHEMIC, ARRHYTHMIC, AND VALVULAR COMPLICATIONS ON PROGNOSIS IS LESS WELL PERCEIVED. CONCLUSION: THE RESULTS OF THE PRESENT SURVEY SUGGEST THAT PREVIUOSLY ISSUED GUIDELINES ARE GENERALLY CAREFULLY FOLLOWED IN THE CLINICAL PRACTICE. ON THE OTHER SIDE, A CERTAIN LACK OF AWARENESS OF EMERGING ASPECTS OF THE CARDIOVASCULAR COMORBITIES OF ACROMEGALY CONFIRMS THE NECESSITY OF PERIODICALLY UPDATING THE GUIDELINES BASED ON THE AVAILABILITY OF NEW CLINICAL INFORMATION.
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2008 AUG;31(8):731-8. ANNO: 2008 - ISBN:
Titolo	LARGE GENOMIC DELETIONS IN AIP IN PITUITARY ADENOMA PREDISPOSITION.
Autori	GEORGITSI M, HELIÖVAARA E, PASCHKE R, KUMAR AV, TISCHKOWITZ M, VIERIMAA O, SALMELA P, SANE T, DE MENIS E, CANNAVÒ S, GÜNDOGDU S, LUCASSEN A, IZATT L, AYLWIN S, BANO G, HODGSON S, KOCH CA, KARHU A, AALTONEN LA.

Abstract	CONTEXT: GERMLINE MUTATIONS IN AIP HAVE BEEN RECENTLY SHOWN TO CAUSE PITUITARY ADENOMA PREDISPOSITION (PAP). SUBSEQUENTLY, MANY INTRAGENIC GERMLINE MUTATIONS HAVE BEEN REPORTED, BOTH IN FAMILIAL AND IN SPORADIC SETTINGS. OBJECTIVE: OUR OBJECTIVE WAS TO EVALUATE THE POSSIBLE CONTRIBUTION OF LARGE GENOMIC GERMLINE AIP DELETIONS, AN IMPORTANT MUTATION TYPE IN TUMOR PREDISPOSITION SYNDROMES, IN PAP. DESIGN: HERE, WE APPLIED THE MULTIPLEX LIGATION-DEPENDENT PROBE AMPLIFICATION ASSAY TO EXAMINE WHETHER LARGE GENOMIC AIP OR MEN1 ALTERATIONS ACCOUNT FOR A SUBSET OF PAP CASES. PATIENTS: THE STUDY WAS PERFORMED ON FAMILIAL AND SPORADIC PITUITARY ADENOMA CASES OF EUROPEAN ORIGIN, WHICH HAD PREVIOUSLY TESTED NEGATIVE FOR GERMLINE AIP AND MEN1 MUTATIONS BY SEQUENCING. RESULTS: TWO OF 21 PITUITARY ADENOMA FAMILIES (9.5%) WERE FOUND TO HARBOR AN AIP DELETION. NO COPY NUMBER CHANGES WERE DETECTED AMONG 67 SPORADIC PITUITARY ADENOMA PATIENTS. NO MEN1 DELETIONS WERE FOUND. CONCLUSIONS: THE PRESENT STUDY SHOWS THAT LARGE GENOMIC AIP DELETIONS ACCOUNT FOR A SUBSET OF PAP. THEREFORE, IN SUSPECTED PAP CASES UNDERGOING COUNSELING AND AIP GENETIC TESTING, MULTIPLEX LIGATION-DEPENDENT PROBE AMPLIFICATION COULD BE CONSIDERED IF DIRECT SEQUENCING DOES NOT IDENTIFY A MUTATION. PMID: 18628514 [PUBMED - INDEXED FOR MEDLINE]
Anno pubblicazione e riferimenti	J CLIN ENDOCRINOL METAB. 2008 OCT;93(10):4146-51. EPUB 2008 JUL 15. ANNO: 2008 - ISBN:
Titolo	SOLUBLE ADHESION MOLECULES LEVELS IN PATIENTS WITH CUSHING'S SYNDROME BEFORE AND AFTER CURE.
Autori	ERMETICI F, MALAVAZOS AE, CORBETTA S, ELLER-VAINICHER C, CANNAVÒ S, CORSI MM, AMBROSI B.
Abstract	OBJECTIVE: PATIENTS WITH CUSHING'S SYNDROME (CS) SHOW A HIGH PREVALENCE OF CARDIOVASCULAR RISK FACTORS AND ATHEROSCLEROSIS, PERSISTING EVEN AFTER CURE. SOLUBLE INTERCELLULAR ADHESION MOLECULE-1 (SICAM-1) AND VASCULAR CELL ADHESION MOLECULE-1 (SVCAM-1) ARE SURROGATE MARKERS OF ENDOTHELIAL FUNCTION INVOLVED IN THE INITIATION OF ATHEROSCLEROSIS. THIS STUDY AIMED TO EVALUATE SICAM-1 AND SVCAM-1 LEVELS IN PATIENTS WITH CS BEFORE AND AFTER SUCCESSFUL CURE. SUBJECTS AND METHODS: SICAM-1 AND SVCAM-1 LEVELS WERE EVALUATED IN 28 PATIENTS WITH ACTIVE CS AND IN 12 PATIENTS WITH CUSHING'S DISEASE (CD), 6-12 MONTHS AFTER DISEASE REMISSION. BODY MASS INDEX (BMI), BLOOD PRESSURE, GLUCOSE, SERUM LIPIDS, ACTH, CORTISOL AND URINARY FREE CORTISOL (UFC) WERE MEASURED IN BASAL CONDITIONS IN ALL PATIENTS. RESULTS: AT BASELINE, SICAM-1 LEVELS POSITIVELY CORRELATED WITH BMI (R=0.443, P<0.01), WHILE NO CORRELATIONS BETWEEN SICAM/SVCAM LEVELS AND ACTH, CORTISOL OR UFC WERE FOUND. PLASMA ACTH, SERUM CORTISOL, AND UFC LEVELS SIGNIFICANTLY DECREASED IN 12 CURED PATIENTS, BUT ICAM-1 AND VCAM-1 LEVELS WERE UNCHANGED (12.7+/-1.8 VS 10.1+/-0.9 NG/ML AND 33.5+/-4.4 VS 35.8+/-4.0 NG/ML, RESPECTIVELY). OBESITY, HYPERTENSION, AND IMPAIRED GLUCOSE METABOLISM PERSISTED 1 YR AFTER THE BIOCHEMICAL CURE OF HYPERCORTISOLISM. A SIGNIFICANT REDUCTION IN ICAM-1 LEVELS WAS OBSERVED IN 4 OUT OF 12 CURED PATIENTS AS WELL AS A REMISSION FROM DIABETES, HYPERTENSION OR OBESITY. CONCLUSIONS: ICAM/VCAM-1 LEVELS SHOW A GREAT VARIABILITY IN PATIENTS WITH ACTIVE CS, NOT CORRELATED WITH CORTISOL LEVELS, AND ARE SLIGHTLY MODIFIED IN SOME CURED PATIENTS WITH CD. THE PERSISTENCE OF OBESITY, HYPERTENSION, AND IMPAIRED GLUCOSE METABOLISM MAY BE RESPONSIBLE FOR THE MAINTENANCE OF A SUBCLINICAL ENDOTHELIAL DYSFUNCTION, MAKING THESE SUBJECTS STILL AT HIGH CARDIOVASCULAR RISK AND NEEDING A LONG-TERM FOLLOW-UP.

Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2008 MAY;31(5):389-92. ANNO: 2008 - ISBN:
Titolo	ARYL HYDROCARBON RECEPTOR INTERACTING PROTEIN (AIP) GENE MUTATION ANALYSIS IN CHILDREN AND ADOLESCENTS WITH SPORADIC PITUITARY ADENOMAS.
Autori	GEORGITSI M, DE MENIS E, CANNAVÒ S, MÄKINEN MJ, TUPPURAINEN K, PAULETTO P, CURTÒ L, WEIL RJ, PASCHKE R, ZIELINSKI G, WASIK A, LUBINSKI J, VAHTERISTO P, KARHU A, AALTONEN LA.
Abstract	OBJECTIVE: PITUITARY ADENOMAS OCCUR RARELY IN CHILDHOOD AND ADOLESCENCE. PITUITARY ADENOMA PREDISPOSITION (PAP) HAS BEEN RECENTLY ASSOCIATED WITH GERMLINE MUTATIONS IN THE ARYL HYDROCARBON RECEPTOR INTERACTING PROTEIN (AIP) GENE. THE AIM OF THE STUDY WAS TO EXAMINE THE PROPORTION OF GERMLINE AIP MUTATIONS IN APPARENTLY SPORADIC PAEDIATRIC PITUITARY ADENOMAS. DESIGN: GENOMIC DNA WAS ANALYSED FOR MUTATIONS IN THE AIP GENE, BY PCR AMPLIFICATION AND DIRECT SEQUENCING. PATIENTS: A POPULATION-BASED COHORT CONSISTING OF 36 APPARENTLY SPORADIC PAEDIATRIC PITUITARY ADENOMA PATIENTS, REFERRED TO TWO MEDICAL CENTRES IN ITALY, WAS INCLUDED IN THE STUDY. PATIENTS WERE EITHER LESS THAN 18 YEARS AT DIAGNOSIS, OR SHOWED CLINICAL EVIDENCE OF ADENOMA DEVELOPMENT BEFORE THE AGE OF 18 YEARS. RESULTS: A HETEROZYGOUS IN-FRAME DELETION Y248DEL (C.742_744DELTAC) WAS IDENTIFIED IN ONE GH-SECRETING ADENOMA PATIENT. LOSS OF HETEROZYGOSITY (LOH) ANALYSIS OF TUMOUR DNA REVEALED THE LOSS OF THE WILD-TYPE ALLELE. FIRST DEGREE RELATIVES CARRYING THE MUTATION WERE CLINICALLY UNAFFECTED. CONCLUSIONS: WHILE MUTATIONS WERE ABSENT IN NON-GH-SECRETING ADENOMA PATIENTS, GERMLINE AIP MUTATIONS CAN BE FOUND IN CHILDREN AND ADOLESCENTS WITH GH-SECRETING TUMOURS, EVEN IN THE ABSENCE OF FAMILY HISTORY. THE PRESENT STUDY REPORTS THE AIP MUTATION ANALYSIS RESULTS ON PATIENTS OF A SINGLE ETHNIC ORIGIN. CLEARLY, FURTHER STUDIES ARE NEEDED TO IMPROVE OUR KNOWLEDGE ON THE ROLE OF AIP IN PAEDIATRIC PITUITARY ADENOMAS.
Anno pubblicazione e riferimenti	CLIN ENDOCRINOL (OXF). 2008 OCT;69(4):621-7. EPUB 2008 APR 10. ANNO: 2008 - ISBN:
Titolo	EVALUATION OF MYOCARDIAL FIBROSIS BY IMAGING TECHNIQUES IN ACROMEGALY.
Autori	ROMANELLO G, DI BELLA G, MINUTOLI F, CANNAVO S.
Abstract	
Anno pubblicazione e riferimenti	CLIN ENDOCRINOL (OXF). 2008 OCT;69(4):685-6. EPUB 2008 APR 3. ANNO: 2008 - ISBN:
Titolo	

	DOPAMINE D2 RECEPTOR GENE POLYMORPHISMS AND RESPONSE TO CABERGOLINE THERAPY IN PATIENTS WITH PROLACTIN-SECRETING PITUITARY ADENOMAS.
Autori	FILOPANTI M, BARBIERI AM, ANGIONI AR, COLAO A, GASCO V, GROTTOLI S, PERI A, BAGLIONI S, FUSTINI MF, PIGLIARU F, MONTE PD, BORRETTA G, AMBROSI B, JAFFRAIN-REA ML, GASPERI M, BROGIONI S, CANNAVÒ S, MANTOVANI G, BECK-PECCOZ P, LANIA A, SPADA A.
Abstract	DOPAMINE-AGONIST CABERGOLINE (CB) REDUCES PROLACTIN (PRL) SECRETION AND TUMOR SIZE IN 80% OF PATIENTS WITH PROLACTIN-SECRETING ADENOMAS (PRL-OMAS) BY BINDING TYPE 2 DOPAMINE RECEPTOR (DRD2). THE MECHANISMS RESPONSIBLE FOR RESISTANCE TO CB REMAIN LARGELY UNKNOWN. TO ASSESS THE ASSOCIATION OF DRD2 WITH SENSITIVITY TO CB, TAQI-A1/A2, TAQI-B1/B2, HPHI-G/T AND NCOI-C/T GENOTYPES WERE DETERMINED IN A CROSS-SECTIONAL RETROSPECTIVE STUDY, INCLUDING 203 PATIENTS WITH PRL-OMA. DRD2 ALLELES FREQUENCIES DID NOT DIFFER BETWEEN PATIENTS AND 212 HEALTHY SUBJECTS. CONVERSELY, NCOI-T ALLELE FREQUENCY WAS HIGHER IN RESISTANT RATHER THAN RESPONSIVE PATIENTS, CONSIDERING BOTH PRL NORMALIZATION (56.6 VS 45.3%, P=0.038) AND TUMOR SHRINKAGE (70.4 VS 41.4%, P=0.006). FINALLY, [TAQI A1-/TAQI B1-/HPHI T-/NCOI T-] HAPLOTYPE WAS FOUND IN 34.5% OF PATIENTS NORMALIZING PRL WITH < OR =3 MG/WEEK OF CB VS 11.3% OF RESISTANTS (P=0.021). IN CONCLUSION, RESISTANCE TO CB WAS ASSOCIATED WITH DRD2 NCOI-T+ ALLELE, CONSISTENT WITH EVIDENCE SUGGESTING THAT THIS VARIANT MAY LEAD TO REDUCTION AND INSTABILITY OF DRD2 MRNA OR PROTEIN.
Anno pubblicazione e riferimenti	PHARMACOGENOMICS J. 2008 OCT;8(5):357-63. EPUB 2008 MAR 11. ANNO: 2008 - ISBN:
Titolo	ATRIAL PARASYSTOLE IN LEFT VENTRICULAR NONCOMPACTION: A MORPHOFUNCTIONAL STUDY BY ECHOCARDIOGRAPHY AND MAGNETIC RESONANCE IMAGING.
Autori	DE GREGORIO C, DI BELLA G, CURTÒ L, CANNAVÒ S, COGLITORE S.
Abstract	ISOLATED LEFT VENTRICULAR NONCOMPACTION IS A RECENTLY RECOGNIZED AGE-INDEPENDENT CARDIAC GENETIC DISORDER CAUSED BY HETEROGENEOUS DEFECTS IN ENDO-MYOCARDIAL MORPHOGENESIS. TRANSTHORACIC ECHOCARDIOGRAPHY AND CARDIAC MAGNETIC RESONANCE ARE THE MOST RELIABLE TECHNIQUES TO MAKE A DIAGNOSIS OF THE DISEASE, NONINVASIVELY. ARRHYTHMIC ATRIAL AND VENTRICULAR DISORDERS HAVE BEEN REPORTED IN 20-50% OF THESE PATIENTS. THE MORPHOLOGICAL AND FUNCTIONAL FINDINGS ARE DESCRIBED IN A YOUNG WOMAN IN WHOM THE EXCLUSIVE CLINICAL SIGN OF ISOLATED VENTRICULAR NONCOMPACTION WAS AN ATRIAL PARASYSTOLE.
Anno pubblicazione e riferimenti	J CARDIOVASC MED (HAGERSTOWN). 2008 MAR;9(3):285-8. ANNO: 2008 - ISBN:
Titolo	HYPOPHOSPHATEMIA AS UNUSUAL CAUSE OF ARDS IN CUSHING'S SYNDROME SECONDARY TO ECTOPIC CRH PRODUCTION. A CASE REPORT.

Autori	MONDELLO S, FODALE V, CANNAVÒ S, ALOISI C, ALMOTO B, BUEMI M, SANTAMARIA LB.
Abstract	HYPOPHOSPHATEMIA IS AN UNUSUAL CAUSE OF ACUTE RESPIRATORY DISTRESS SYNDROME (ARDS). WE DESCRIBE A HYPOPHOSPHATEMIA-RELATED ARDS CASE REPORT OF A 50-YEAR-OLD WOMAN WITH ACTH DEPENDENT CUSHING'S SYNDROME SECONDARY TO ECTOPIC CRH PRODUCTION. THE PATIENT CLINICALLY SHOWED HYPOTENSION TACHYPNEA AND INCREASING DYSPNEA. LABORATORY DATA SHOWED CARBOHYDRATE INTOLERANCE, SEVERE HYPOKALEMIA, AND HYPOPHOSPHATEMIA. ARTERIAL BLOOD GASES MEASUREMENT REVEALED HYPOCAPNIA AND ELEVATION IN BICARBONATE VALUES. CHEST X-RAY SHOWED DIFFUSE BILATERAL ALVEOLAR INFILTRATES SIMILAR TO ACUTE PULMONARY EDEMA AND KERLEY'S STRIAE. CHEST CT SCAN EVIDENCED DIFFUSE GROUND GLASS OPACIFICATION, BILATERAL PATCHY CONSOLIDATION, AND FIBROSIS, COMPATIBLE WITH THE RECOVERY PHASE OF ARDS. CLINICAL SYMPTOMS AND LABORATORY EXAMINATIONS SUPPORTED THE DIAGNOSIS OF ARDS. THE PATIENT WAS MANAGED WITH SUPPLEMENTAL POTASSIUM, OCTREOTIDE, AND OXYGEN THERAPY. HYPOPHOSPHATEMIA WAS MANAGED BY TREATING THE UNDERLYING DISORDER. SUCCESSIVE SURGICAL REMOVAL OF THE ADRENAL GLAND LED TO COMPLETE RESOLUTION OF CUSHING'S SYNDROME. IN CONCLUSION, ALTHOUGH RARE AND ASSOCIATED WITH SPECIFIC RISK FACTORS, HYPOPHOSPHATEMIA SHOULD BE SUSPECTED IN PATIENTS WHO DEVELOP UNEXPLAINED ARDS.
Anno pubblicazione e riferimenti	SCIENTIFICWORLDJOURNAL. 2008 FEB 6;8:138-44. ANNO: 2008 - ISBN:
Titolo	PEGVISOMANT IN ACROMEGALY: WHY, WHEN, HOW.
Autori	COLAO A, ARNALDI G, BECK-PECCOZ P, CANNAVÒ S, COZZI R, DEGLI UBERTI E, DE MARINIS L, DE MENIS E, FERONE D, GASCO V, GIUSTINA A, GROTTOLI S, LOMBARDI G, MAFFEI P, MARTINO E, MINUTO F, PIVONELLO R, GHIGO E.
Abstract	
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2007 SEP;30(8):693-9. ANNO: 2007 - ISBN:
Titolo	MRI FINDING OF SIMULTANEOUS COEXISTENCE OF GROWTH HORMONE-SECRETING PITUITARY ADENOMA WITH INTRACRANIAL MENINGIOMA AND CAROTID ARTERY ANEURYSMS: REPORT OF A CASE.
Autori	CURTO L, SQUADRITO S, ALMOTO B, LONGO M, GRANATA F, SALPIETRO F, TORRE ML, MARINI F, TRIMARCHI F, CANNAVO S.
Abstract	COEXISTENCE OF PITUITARY ADENOMA, INTRACRANIAL MENINGIOMA AND CEREBRAL ANEURYSM HAS NEVER BEEN DESCRIBED. WE REPORT ON A PATIENT WITH GH-SECRETING PITUITARY MACROADENOMA ASSOCIATED WITH A RIGHT FRONTAL MENINGIOMA AND WITH TWO INTRACAVERNOUS ASYMPTOMATIC ANEURISMS. A 61-YEAR-OLD WOMAN WAS REFERRED TO OUR ENDOCRINE UNIT 13 YEARS AFTER A RIGHT FRONTAL CRANIOTOMY

FOR A PITUITARY TUMOUR. ENDOCRINE INVESTIGATION SHOWED HIGH LEVELS OF IGF-1 (560 NG/ML) AND INCREASED BASAL SERUM GH (56 NG/ML) LEVELS, NOT SUPPRESSED AFTER OGTT. MRI SHOWED PERSISTENCE OF A HOMOGENEOUSLY ENHANCING INTRA- AND SUPRASELLAR LESION, COMPRESSING THE VISUAL PATHWAYS, WITH BILATERAL INTRACAVERNOUS INVASION AND SIMULTANEOUS COEXISTENCE OF A RIGHT INTRACAVERNOUS INTERNAL CAROTID ARTERY (ICA) ANEURYSM IN DIRECT CONTACT WITH THE PITUITARY TUMOUR. SOMATOSTATIN ANALOG TREATMENT NORMALIZED GH AND IGF-1 LEVELS. EIGHT MONTHS LATER, THE PATIENT UNDERWENT A BALLOON ICA OCCLUSION WITH DISAPPEARANCE OF THE RIGHT ICA ANEURYSM. ONE YEAR LATER, A NEW MRI CONFIRMED THE PRESENCE OF THE PITUITARY MASS SHOWING ALSO A RIGHT INTRACRANIAL FRONTAL MENINGIOMA AND A NEW ICA ANEURYSM ON THE LEFT SIDE. PREVIOUS STUDIES HAVE SUGGESTED THAT PROLONGED GH HYPERSECRETION COULD PLAY A ROLE IN THE GENESIS OF INTRACRANIAL ANEURYSMS, INDUCING ATHEROSCLEROTIC AND/OR DEGENERATIVE MODIFICATION OF THE ARTERIAL WALLS. OTHER AETIOLOGICAL FACTORS INCLUDE A MECHANICAL EFFECT DUE TO A DIRECT CONTACT BETWEEN ADENOMA AND ANEURYSM. COEXISTENCE OF PITUITARY ADENOMA AND INTRACRANIAL MENINGIOMA IS A RARE EVENT, BUT ALSO FOR THIS ASSOCIATION IT HAS BEEN SUGGESTED THAT GH OR OTHER GROWTH FACTORS COULD PLAY A ROLE IN APPEARANCE OR IN GROWTH OF MENINGIOMA. IN OUR CASE, MENINGIOMA APPEARED AND GREW, DESPITE THE EFFECTIVE TREATMENT OF ACROMEGALY.

Anno pubblicazione e riferimenti

PITUITARY. 2007;10(3):299-305.
ANNO: 2007 - ISBN:

Titolo

HYPOPITUITARISM FINDINGS IN PATIENTS WITH PRIMARY BRAIN TUMORS 1 YEAR AFTER NEUROSURGICAL TREATMENT: PRELIMINARY REPORT.

Autori

DE MARINIS L, FUSCO A, BIANCHI A, AIMARETTI G, AMBROSIO MR, SCARONI C, CANNAVO S, DI SOMMA C, MANTERO F, DEGLI UBERTI EC, GIORDANO G, GHIGO E.

Abstract

HYPOPITUITARISM REPRESENTS THE CONSEQUENCE OF MANY CONDITIONS, IN BOTH THE ADULT AND CHILD POPULATION. IT MAY OCCUR AFTER NEUROSURGICAL TREATMENT OF BRAIN TUMORS ARISING NEAR SELLA TURCICA. MUCH MORE ATTENTION HAS BEEN FOCUSED ON LESIONS FAR FROM THE HYPOTHALAMIC-PITUITARY REGION AS POSSIBLE CAUSES OF PITUITARY IMPAIRMENT, VALIDATING THE CONCEPT OF THE PARTICULAR FRAGILITY OF THESE STRUCTURES. THE AIM OF THIS STUDY WAS TO EVALUATE PITUITARY FUNCTION IN PARTICULAR GH DEFICIENCY (GHD) IN PATIENTS SUBMITTED TO NEUROSURGERY FOR BENIGN TUMORS OF THE CENTRAL NERVOUS SYSTEM (CNS) NOT INVOLVING HYPOTHALAMIC-PITUITARY REGION. WE OBSERVED 37 PATIENTS WITH BENIGN BRAIN TUMORS [13 MALES, 24 FEMALES, AGE: 54.6+/-13.9 YR; BODY MASS INDEX (BMI): 25.1+/-4.0 KG/M2] PERFORMING A BASIC EVALUATION OF THE PITUITARY FUNCTION AND A DYNAMIC TEST OF THE GH/IGF-I AXIS [GHRH (1 MICROG/KG IV)+ARGININE (0.5 G/KG IV) TEST] FOR 3 AND 12 MONTHS AFTER THE NEUROSURGICAL TREATMENT. SOME DEGREE OF HYPOPITUITARISM WAS SHOWN IN 16 PATIENTS (43.2%) AT THE 3-MONTHS FOLLOW-UP. HYPOGONADISM WAS PRESENT IN 4 PATIENTS, HYPOADRENALISM IN ANOTHER 4 AND HYPOTHYROIDISM IN 2. TWO PATIENTS SHOWED MILD HYPERPROLACTINEMIA AND NO PATIENTS HAD DIABETES INSIPIDUS. SEVEN PATIENTS (18.9%) WERE GH DEFICIENT (PEAK GH <16.5 MICROG/DL). AT 12 MONTHS RETESTING, SOME DEGREE OF HYPOPITUITARISM WAS CONFIRMED IN 8 PATIENTS, HYPOGONADISM IN 2 AND HYPOTHYROIDISM IN ONE; NO PATIENTS SHOWED HYPOADRENALISM AND GHD WAS PRESENT IN 5. THIS DATA SUGGESTS THAT HYPOPITUITARISM OF VARIOUS DEGREE MAY DEVELOP IN PATIENTS WHO ARE SUBMITTED TO NEUROSURGERY FOR PRIMARY BRAIN TUMORS, EVEN FAR FROM HYPOTHALAMIC-PITUITARY REGION.

Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2006 JUN;29(6):516-22. ANNO: 2006 - ISBN:
Titolo	ACROMEGALY AND CORONARY DISEASE: AN INTEGRATED EVALUATION OF CONVENTIONAL CORONARY RISK FACTORS AND CORONARY CALCIFICATIONS DETECTED BY COMPUTED TOMOGRAPHY.
Autori	CANNAVO S, ALMOTO B, CAVALLI G, SQUADRITO S, ROMANELLO G, VIGO MT, FIUMARA F, BENVENGA S, TRIMARCHI F.
Abstract	CONTEXT: CORONARY ATHEROSCLEROSIS IN ACROMEGALY WAS NOT EXTENSIVELY INVESTIGATED IN THE LITERATURE UNTIL NOW. AT AUTOPSY, IT WAS DEMONSTRATED IN ABOUT 20% OF PATIENTS WITH LONG-LASTING DISEASE, AND MYOCARDIAL INFARCTION WAS REPORTED AS CAUSE OF DEATH IN A QUARTER OF ACROMEGALICS. OBJECTIVE: THE OBJECTIVE OF THE STUDY WAS TO EVALUATE CORONARY ATHEROSCLEROSIS IN A COHORT OF ACROMEGALICS WITH CONTROLLED OR UNCONTROLLED DISEASE. DESIGN: CORONARY RISK WAS EVALUATED BY THE FRAMINGHAM ALGORITHM, ACCORDING TO THE FRAMINGHAM SCORE (FS). PATIENTS WERE STRATIFIED INTO LOW (<6%), INTERMEDIATE (6-20%), AND HIGH (>20%) MIDTERM RISK. CORONARY CALCIUM DEPOSITS WERE DETECTED BY MULTIDETECTOR COMPUTED TOMOGRAPHY AND MEASURED BY THE AGATSTON ALGORITHM. CORONARY ARTERY CALCIUM [AGATSTON SCORE (AS)] WAS QUANTIFIED AT THE LEVEL OF LEFT MAIN ARTERY, LEFT ANTERIOR DESCENDENT ARTERY, LEFT CIRCUMFLEX ARTERY, RIGHT CORONARY ARTERY, AND POSTERIOR DESCENDENT ARTERY. TOTAL AS VALUES IN HEALTHY PERSONS ARE LESS THAN 50 (AGED < 60 YR) AND LESS THAN 300 (AGE > OR = 60 YR). PATIENTS: THIRTY-NINE PATIENTS (12 MALES AND 27 FEMALES, AGED 53.0 +/- 2.1 YR) WERE EVALUATED. IN EACH PATIENT, THE MEAN OF AT LEAST FOUR DETERMINATIONS OF SERUM IGF-I, ASSAYED DURING THE LAST 2 YR BEFORE STUDY, WAS NORMALIZED FOR THE AGE-MATCHED NORMAL RANGE, AND THE RESULT WAS PRESENTED AS SD VALUE (IGF-I SD). ON THE BASIS OF SERUM IGF-I SD, ACROMEGALY WAS CONSIDERED CONTROLLED (< OR =1.9 SD; N = 24) OR UNCONTROLLED (> OR = 2.0 SD; N = 15). RESULTS: THE FS WAS INTERMEDIATE IN 12 AND HIGH IN TWO ACROMEGALICS. OVERALL, THE FS WAS NOT CORRELATED WITH SERUM GH VALUES AND IGF-I SD. MEAN FS WAS NOT SIGNIFICANTLY DIFFERENT BETWEEN PATIENTS WITH CONTROLLED AND UNCONTROLLED ACROMEGALY. TOTAL AS WAS INCREASED IN NINE PATIENTS, MOST FREQUENTLY IN LEFT ANTERIOR DESCENDENT, LEFT CIRCUMFLEX, AND LEFT MAIN ARTERIES. IN THESE NINE PATIENTS, MEAN AS WAS SIMILAR IN INDIVIDUALS WITH CONTROLLED AND THOSE WITH UNCONTROLLED ACROMEGALY, AND THE RATE OF 17% PATIENTS WITH CONTROLLED DISEASE HAVING INCREASED AS WAS NOT STATISTICALLY DIFFERENT FROM THE RATE OF 33% UNCONTROLLED ACROMEGALICS. TOTAL AS WAS INCREASED IN SIX OF 12 MALES AND IN THREE OF 27 FEMALES (CHI(2) 7.1, P < 0.01). OVERALL, TOTAL AS CORRELATED WITH FS (R(2) = 0.4, P < 0.0002) BUT NOT AGE, BODY MASS INDEX, DISEASE DURATION, INDEXED LEFT VENTRICULAR MASS, SERUM CHOLESTEROL, TRIGLYCERIDES, GH, OR IGF-I LEVELS. INCREASED AS WAS MORE FREQUENTLY OBSERVED IN ACROMEGALICS WITH DIABETES MELLITUS (CHI(2) = 5.2, P < 0.05) OR HYPERTENSION (CHI(2) = 9.8, P < 0.002) BUT NOT IN SMOKERS (CHI(2) = 1.34, P = NS). SEVEN OF NINE PATIENTS WITH CORONARY CALCIUM DEPOSITS HAD A FS GREATER THAN 6%. IN SIX OF 13 PATIENTS WITH FS GREATER THAN 6%, MULTIDETECTOR COMPUTED TOMOGRAPHY DID NOT DEMONSTRATE CORONARY CALCIFICATIONS. CONCLUSIONS: IN OUR STUDY, THE INTEGRATED EVALUATION OF FS AND AS SHOWED THAT 41% OF ACROMEGALICS ARE AT RISK FOR CORONARY ATHEROSCLEROSIS AND THAT CORONARY CALCIFICATIONS WERE EVIDENT IN ABOUT HALF OF THEM DESPITE THE FACT THAT MYOCARDIAL INFARCTION WAS NOT MORE FREQUENT IN ACROMEGALIC PATIENTS THAN THE GENERAL POPULATION. MOREOVER, THE CONTROL OF ACROMEGALY DID NOT INFLUENCE SIGNIFICANTLY THE EXTENT OF CORONARY ATHEROSCLEROSIS.

Anno pubblicazione e riferimenti	J CLIN ENDOCRINOL METAB. 2006 OCT;91(10):3766-72. EPUB 2006 JUL 11. ANNO: 2006 - ISBN:
Titolo	ECHOCARDIOGRAPHIC ASSESSMENT OF SUBCLINICAL LEFT VENTRICULAR ECCENTRIC HYPERTROPHY IN ADULT-ONSET GHD PATIENTS BY GEOMETRIC REMODELING: AN OBSERVATIONAL CASE-CONTROL STUDY.
Autori	DE GREGORIO C, CURTÒ L, RECUPERO A, GRIMALDI P, ALMOTO B, VENTURINO M, CENTO D, NARBONE MC, TRIMARCHI F, COGLITORE S, CANNAVÒ S.
Abstract	BACKGROUND: MOST PATIENTS WITH GROWTH HORMONE DEFICIENCY (GHD) SHOW HIGH BODY MASS INDEX. OVERWEIGHT SUBJECTS, BUT GHD PATIENTS, WERE DEMONSTRATED TO HAVE HIGH LEFT VENTRICULAR MASS INDEX (LVMI) AND ABNORMAL LV GEOMETRIC REMODELING. WE SOUGHT TO STUDY THESE CHARACTERISTICS IN A GROUP OF GHD PATIENTS, IN AN ATTEMPT TO ESTABLISH THE BMI-INDEPENDENT ROLE OF GHD. METHODS: FIFTY-FOUR PATIENTS, 28 F AND 26 M, AGED 45.9 +/- 13.1, WITH ADULT-ONSET GHD (PITUITARY ADENOMAS 48.2%, EMPTY SELLA 27.8%, PITUITARY INFLAMMATION 5.5%, CRANIO-PHARYNGIOMA 3.7%, NOT IDENTIFIED PATHOGENESIS 14.8%) WERE ENROLLED. TO MINIMIZE ANY POSSIBLE INTERFERENCES OF BMI ON THE AIM OF THIS STUDY, THE CONTROL GROUP INCLUDED 20 AGE- AND WEIGHT-MATCHED HEALTHY SUBJECTS. THE LV GEOMETRY WAS IDENTIFIED BY THE RELATIONSHIP BETWEEN LVMI (CUT-OFF 125 G/M2) AND RELATIVE WALL THICKNESS (CUT-OFF 0.45) AT ECHOCARDIOGRAPHY. RESULTS: THERE WAS NO SIGNIFICANT BETWEEN-GROUP DIFFERENCE IN RESTING CARDIAC MORPHOLOGY AND FUNCTION, NOR WHEN CONSIDERING AGE-RELATED DISCREPANCY. THE MAJORITY OF PATIENTS HAD NORMAL-LOW LVM/LVMI, BUT ABOUT ONE FOURTH OF THEM SHOWED HIGHER VALUES. THESE FINDINGS CORRELATED TO RELATIVELY HIGH CIRCULATING IGF-1 AND SYSTOLIC BLOOD PRESSURE AT REST. THE MAIN LV GEOMETRIC PATTERN WAS ECCENTRIC HYPERTROPHY IN 22% OF GHD POPULATION (26% OF WITH SEVERE GHD) AND IN 15% OF CONTROLS (P = NS). CONCLUSION: THOUGH THE LACK OF SIGNIFICANT DIFFERENCES IN RESTING LV MORPHOLOGY AND FUNCTION, ABOUT 25% OF GHD PATIENTS SHOWED HIGH LVMI (CONSISTING OF ECCENTRIC HYPERTROPHY), NOT DISSIMILARLY TO OVERWEIGHT CONTROLS. THIS FINDING, WHICH PROGNOSTIC ROLE IS WELL KNOWN IN OBESE AND HYPERTENSIVE PATIENTS, IS WORTHY TO BE INVESTIGATED IN GHD PATIENTS THROUGH WIDER CONTROLLED TRIALS.
Anno pubblicazione e riferimenti	BMC ENDOCR DISORD. 2006 FEB 28;6:1. ANNO: 2006 - ISBN:
Titolo	HYPOPITUITARISM INDUCED BY TRAUMATIC BRAIN INJURY IN THE TRANSITION PHASE.
Autori	AIMARETTI G, AMBROSIO MR, DI SOMMA C, GASPERI M, CANNAVÒ S, SCARONI C, DE MARINIS L, BALDELLI R, BONA G, GIORDANO G, GHIGO E.
Abstract	TRAUMATIC BRAIN INJURY (TBI) HAS BEEN ASSOCIATED WITH HYPOPITUITARISM IN GENERAL AND GH DEFICIENCY (GHD) IN PARTICULAR; THE CONSEQUENCES OF THIS ON GROWTH AND DEVELOPMENT ARE LIKELY TO BE CRITICAL IN CHILDREN AND ADOLESCENTS IN THE SO-CALLED "TRANSITION PHASE". IN ORDER TO VERIFY

	THE CONSEQUENCES OF TBI ON PITUITARY FUNCTION IN THE TRANSITION PHASE, WE STUDIED A POPULATION OF ADOLESCENTS AND YOUNG ADULTS 3 AND 12 MONTHS AFTER BRAIN INJURY [NO. = 23, 9 FEMALES, 14 MALES: AGE: 16-25 YR: BODY MASS INDEX (BMI): 21.9 +/- 0.6 KG/M2]. AT 3 MONTHS, HYPOPITUITARISM WAS PRESENT IN 34.6%. TOTAL, MULTIPLE AND ISOLATED DEFICITS WERE PRESENT IN 8.6, 4.3 AND 21.7%, RESPECTIVELY. DIABETES INSIPIDUS (DI) WAS PRESENT IN 8.6% PATIENTS AND MILD HYPERPROLACTINEMIA IN 4.3%. AT 12 MONTHS, HYPOPITUITARISM WAS PRESENT IN 30.3%. TOTAL, MULTIPLE AND ISOLATED DEFICITS WERE PRESENT IN 8.6, 4.3 AND 17.4%, RESPECTIVELY. DI WAS PRESENT IN 4.3% OF PATIENTS AND MILD HYPERPROLACTINEMIA IN 4.3%. TOTAL HYPOPITUITARISM WAS ALWAYS CONFIRMED AT RETESTING. MULTIPLE AND ISOLATED HYPOPITUITARISM WERE CONFIRMED IN 0/1 AND 2/5, RESPECTIVELY. TWO/23 PATIENTS SHOWED ISOLATED HYPOPITUITARISM AT 12 MONTHS ONLY: 1 PATIENT WITH ISOLATED AT 3 MONTHS SHOWED MULTIPLE HYPOPITUITARISM AT RETESTING. GHD AND SECONDARY HYPOGONADISM WERE THE MOST COMMON ACQUIRED PITUITARY DEFICITS. THESE RESULTS SHOW THE HIGH RISK OF TBI-INDUCED HYPOPITUITARISM ALSO IN THE TRANSITION AGE. THUS IT IS RECOMMENDED THAT PEDIATRIC ENDOCRINOLOGISTS FOLLOW-UP PITUITARY FUNCTION OF CHILDREN AND ADOLESCENTS AFTER BRAIN INJURIES.
Anno pubblicazione e riferimenti	J ENDOCRINOL INVEST. 2005 DEC;28(11):984-9. ANNO: 2005 - ISBN:
CAPACITÀ E COMPETENZE PERSONALI	DAL 1983 HA ACQUISITO ESPERIENZE PROFESSIONALI NELL'AMBITO DELLA FISIOPATOLOGIA NEUROENDOCRINA, ATTRAVERSO STAGES IN PRESTIGIOSI ISTITUTI NAZIONALI E COLLABORAZIONI SIA NAZIONALI CHE INTERNAZIONALI. HA FATTO PARTE DI BOARD SCIENTIFICI FINALIZZATI AD ATTIVITA' DIDATTICA E DI RICERCA PARTECIPANDO ALLA REDAZIONE DI NUMEROSE LINEE GUIDA E DOCUMENTI DI OPINIONE NELL'AMBITO DELLA PATOLOGIA ENDOCRINA.
PRIMA LINGUA	ITALIANO
ALTRE LINGUE	
	INGLESE
Capacità di lettura	BUONO
Capacità di scrittura	BUONO
Capacità di espressione orale	BUONO
CAPACITÀ E COMPETENZE RELAZIONALI	DAL 1986 COORDINA A VARIO TITOLO UN NUMEROSO GRUPPO DI GIOVANI RICERCATORI CHE SVOLGONO ATTIVITA' ASSISTENZIALE E SCIENTIFICA NELL'AMBITO DELLA PATOLOGIA NEUROENDOCRINA. SVOLGE DAL 1996 ATTIVITA' DI TUTOR A VARIO TITOLO NELL'AMBITO DEL CORSO DI LAUREA IN MEDICINA E