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Introduction: In addition to somatic symptoms the acromegalic patients demonstrate psychosocial and personality changes, and occasionally the cooccurrence of mental disorders.

Objective: To ascertain the psychosocial profile of acromegalic patients a cross-sectional study was designed.

Methods: Forty two patients with acromegaly and thirty two with non-functioning adenomas underwent a cross-sectional assessment regarding their socio-demographic and clinic profiles, including the quality of life (ACROQOL and WHOQOL), psychiatric morbidity (General Health Questionnaire-28) and acceptance of illness (AIS).

Results: The acromegaly group had predominance of urban married females (59.5%) with mean age 52.31 ± 14.81 , and mean duration of illness since diagnosis of 8.71 ± 8.69 years. The average ACROQOL score was 55.38 ± 16.33 . Age, quality of life and acceptance of illness were not associated factors in acromegaly versus non-functioning adenomas comparison. Seventeen subjects in both groups scored positive indicating presence of psychiatric morbidity on the GHQ-28, that is 40.48% of acromegaly patients and 53.13% of non-functioning adenomas patients. Compared to the GHQ-negative group in all subjects, the GHQ-positive group had significantly poorer quality of life in physical health domain measured with WHO Quality of Life- BREF ($p < 0.001$) and lower scores in AIS scale ($p < 0.01$).

Conclusion: Our data revealed that pituitary adenomas may affect psychosocial aspects of the patients' everyday lives and psychiatric morbidity may influence on physical perspective of quality of life, as well as on the acceptance of illness. There is no difference in psychosocial perspective between patients with acromegaly and non-functioning adenomas in the study group.