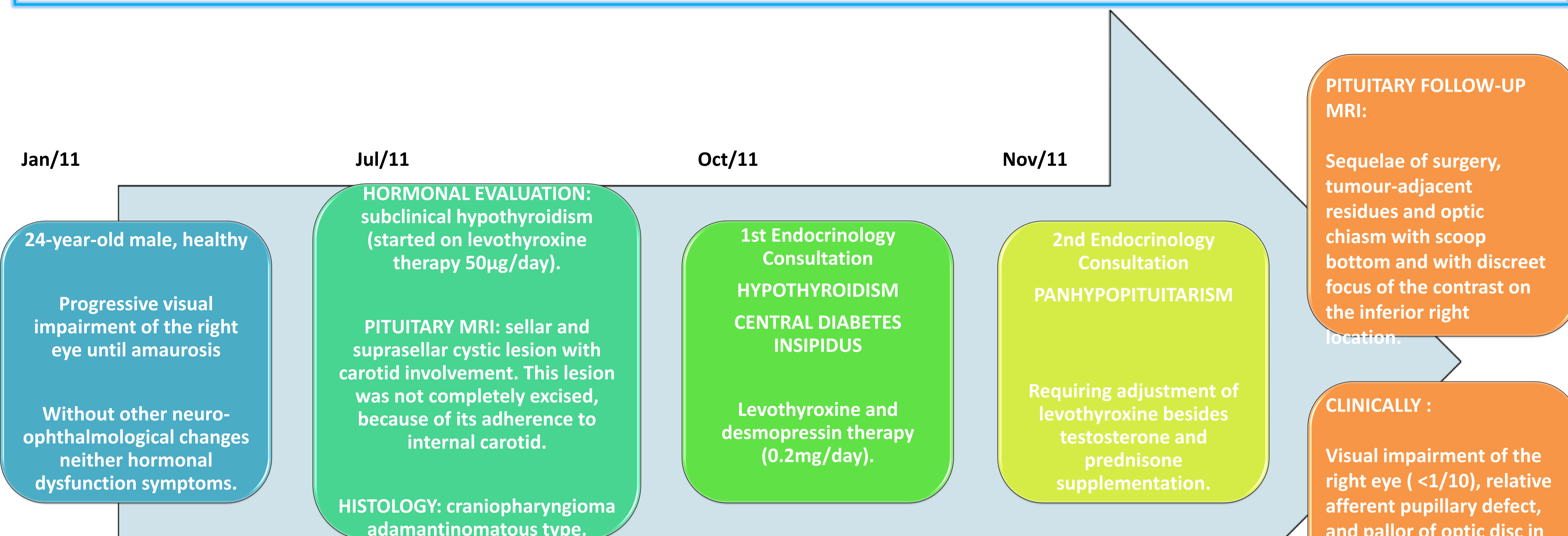


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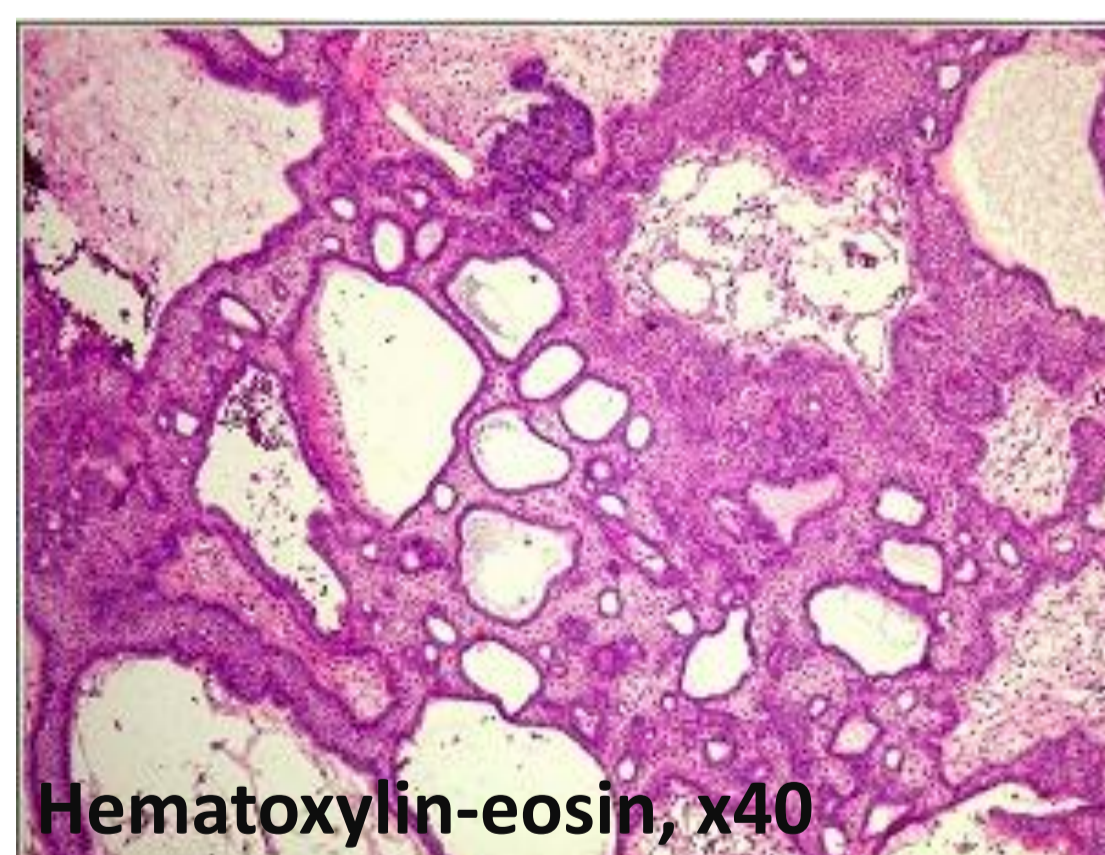
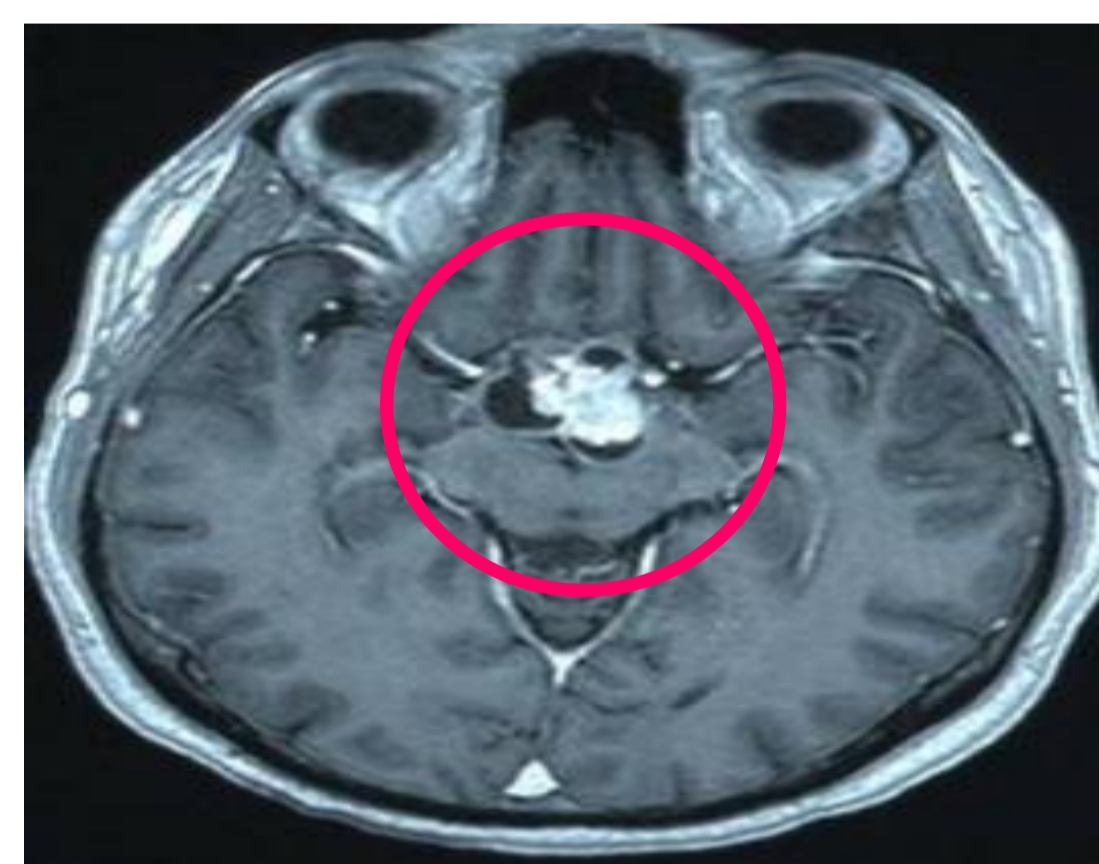
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INTRODUCTION

- ✓ Craniopharyngiomas are intracranial tumors that develop from epithelial Rathke's pouch rests. They have a bimodal age distribution, with peak incidence at childhood and in the adult/elderly, although in our series we have more patients in a middle peak.
- ✓ Usually they are benign but responsible for significant morbidity, particularly when located near critical structures such as optic chiasm, pituitary gland and hypothalamus, and thus might cause visual, neurological and endocrine deficits.



	Value	Normal Range
TSH	0.20 mUI/mL	0.35-4.94
FT4	0.73 ng/dL	0.70-1.48
FT3	1.91 ng/dL	1.71-3.71



CRANIOPHARYNGIOMA ADAMANTINOMATOUS TYPE
Complex epithelial lesion with several distinctive morphologic features: peripheral palisading of the epithelium; frequently, the inner epithelium beneath the superficial palisade undergoes hydropic vacuolization as is referred to as the stellate reticulum; Intramural cysts; scattered nodules of keratin

	Value	Normal Range
FT4	0.44 ng/dL	0.70-1.48
FT3	2.82 ng/dL	1.71-3.71
TSH	3.05 µUI/mL	0.35-4.94
Total Testost	<0.03ng/mL	2.8-8.0
LH	0.48 mUI/mL	1.7-8.6
FSH	0.97 mUI/mL	1.5-12.4
Prolactin	20 ng/mL	4.0-15.0
Cortisol	0.43µg/dL	6.2-19.4
ACTH	11.6 ng/L	<63.3
Serum Osmol	285 mOsmol/kg	282-300
Urinary Osmol	407 mOsmol/kg	50-1200

CONCLUSION

- ✓ Craniopharyngiomas are rare tumours, often with suprasellar extension. Early diagnosis and treatment require a high diagnostic accuracy when dealing with visual impairment, neurological and hormonal symptoms. They tend to invade locally and relapse after treatment, requiring a long follow-up.