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Pituitary Metastasis in Squamous Cell Lung Carcinoma: A Rare Entity

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Introduction: Metastases to the pituitary gland are extremely rare metastases which can be asymptomatic and easily overlooked in imaging. Diabetes insipidus, presenting with hypernatremia, polyuria and polydipsia, visual problems and headaches may occur in symptomatic patients. Pulmonary malignancies, more frequently adenocarcinomas, are the second most common tumors after breast cancer metastasizing to pituitary. It is important to diagnose the metastasis early and to start appropriate treatment. In this case report, a male patient diagnosed with lung squamous cell carcinoma with asymptomatic pituitary metastasis is presented.

Case Presentation: A 70-year-old man was referred to our clinic due to a right lower lobe mass in thorax computed tomography (CT). Bronchoscopic biopsy from the intermediar bronchus revealed squamous cell carcinoma. Positron emission tomography (PET/CT) imaging revealed increased metabolic activity in the lung mass, multiple mediastinal lymphadenopathies, liver and diffuse bone lesions along with the left side of the pituitary gland. The patient's hormone panel was consistent with hyperprolactinemia and hypogonadotropic hypogonadism. Pituitary magnetic resonance imaging detected deviation in the infundibulum and optic chiasm indentation with a 18*12 mm mass lesion. The patient was diagnosed with pituitary metastasis and radiotherapy was planned. He could not manage to visit to the follow-up and died in the first month of the diagnosis.

Conclusion: Pituitary gland metastasis is extremely rare in lung cancer. It can be detected incidentally in imaging findings or specific symptoms encountered in the follow-ups suggesting pituitary metastasis. It is crucial to diagnose early and to provide appropriate treatment especially for increasing the quality of life.

Keywords: Hyperprolactinemia, lung cancer, pituitary metastasis