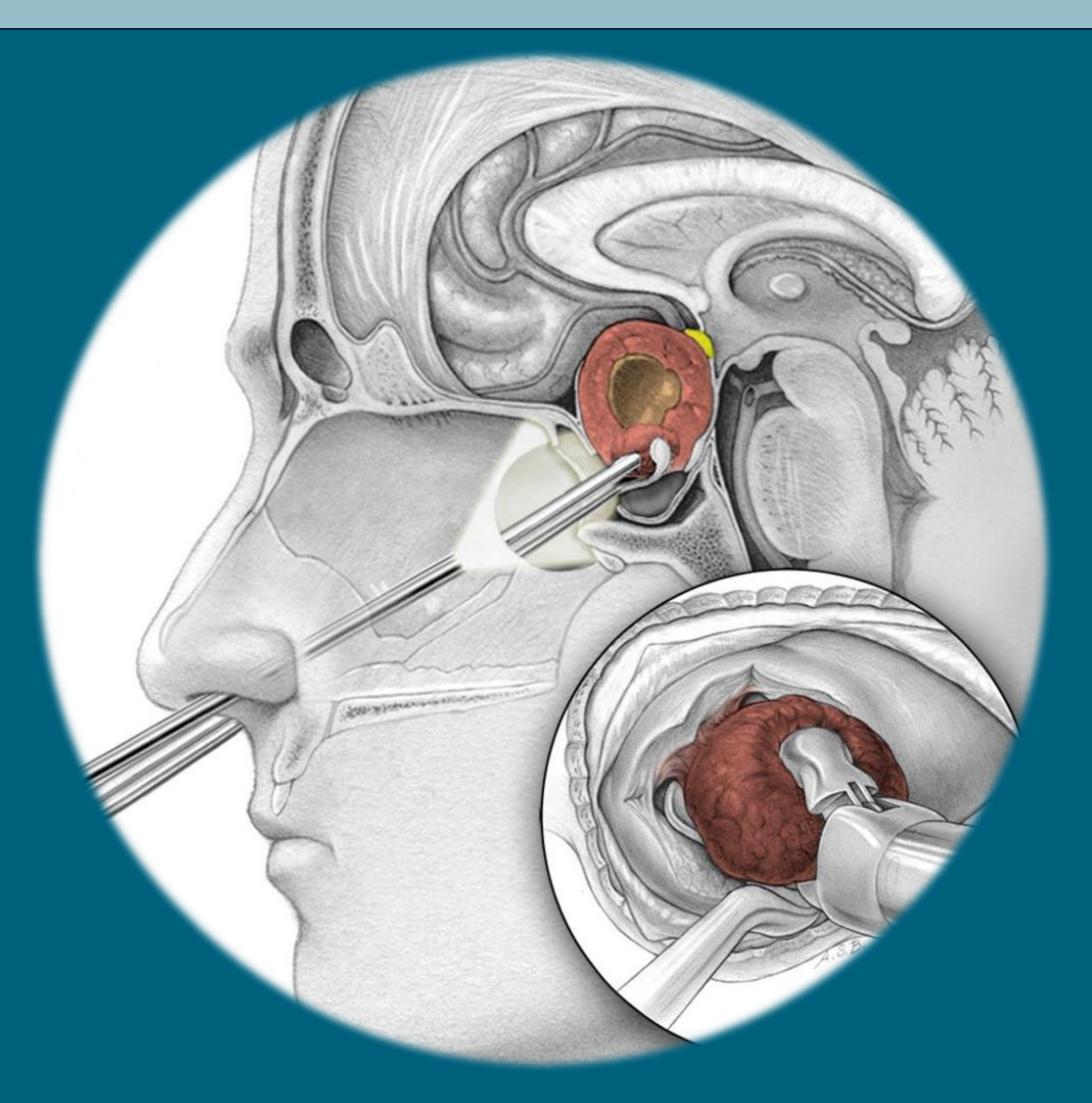
Developing and validating a pituitary-specific, patient reported outcome measure across the United Kingdom and Ireland



Patient-Reported Outcome Measures in Endonasal Skull base Surgery (PROMESS) — Prospective Multi Centre

Validation Study

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BACKGROUND

- Pituitary adenomas are common benign brain tumors that • **impact quality of life (QoL)** through ophthalmic and endocrine sequelae.
- Transsphenoidal surgery is the primary treatment for large ۲ non-functioning and select functioning adenomas.
- No specific Patient Reported Outcome Measure (PROM) • exists for QoL changes after pituitary surgery.
- The **Pituitary Outcome Score (POS**) was developed to • assess overall, ophthalmic, endocrine, and nasal QoL.

PRELIMINARY RESULTS

- Number of recruiting centres: 8
- **Total participants enrolled:** 92 (52% Male)
- **Baseline participant demographics:**
 - 32% visually impaired, 0% blind ۲
 - 58% Non-functioning, 15% Acromegaly, 14% Cushing's, 4%
 - Prolactinoma, 3% TSHoma
 - 84% Macroadenoma
 - 29% glucocorticoid dependent, 4% DDAVP dependent
 - 16% Previously undergone surgery

Methodological learnings:

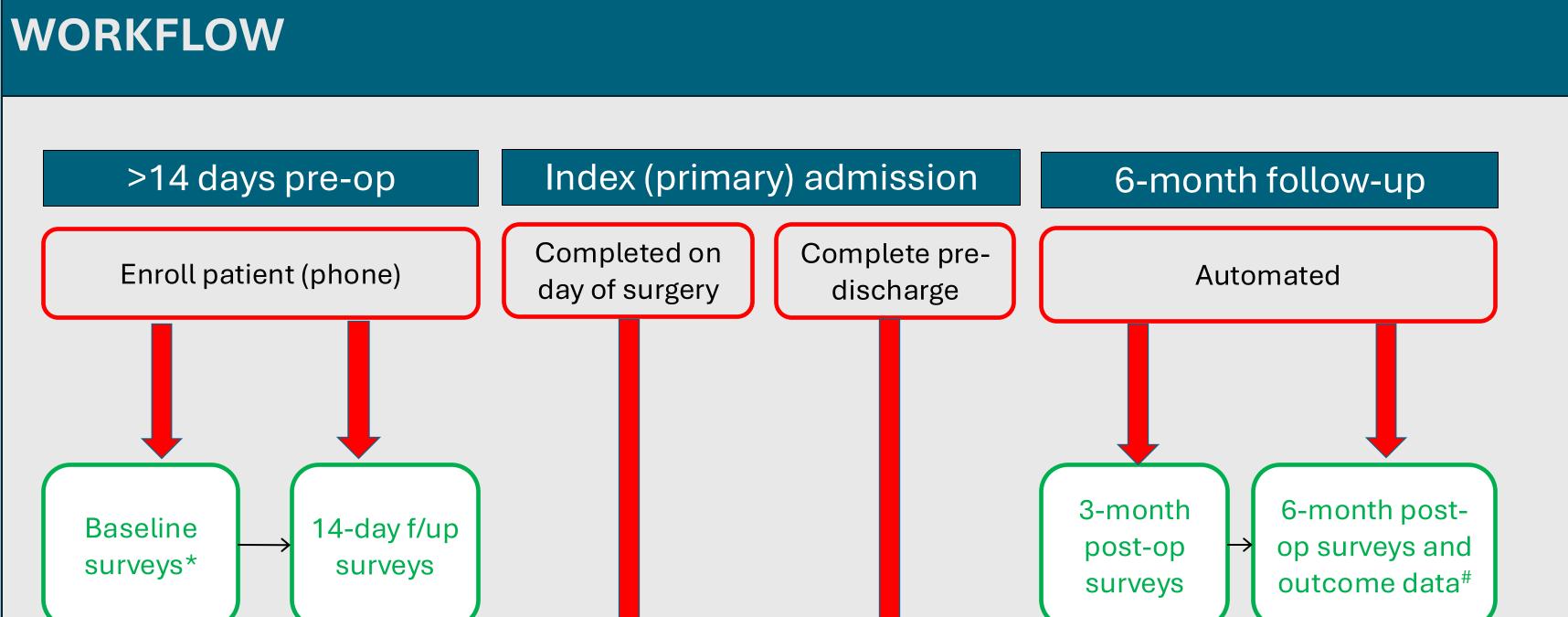
- Collaborative research models power the validation of PROMS through enablement of sociodemographic heterogeneity
- Patients are motivated to inform the development of patient centered outcome measures
- Involvement of neurosurgery, endocrinology, ophthalmology, and patients has been key to establishing robust questionnaire construct validity.

- This study aims to:
 - Validate POS in the UK and Ireland.
 - Assess factors influencing POS changes, including: 2).
 - Surgical approach & skull base repair
 - Complications (e.g., CSF rhinorrhoea)
 - Endocrine outcomes (e.g., remission)

- **Operative details:**
 - 96% transsphenoidal approach, 4% extended transsphenoidal approach
 - 5% involved an ear nose and throat surgeon
- **Inpatient complications**
 - 1 CSF leak, treated by lumbar drainage, 0% mortality
 - 21% hyponatraemia, 7% hypernatraemia
 - 61% discharged on glucocorticoids, 5% discharged on DDAVP,

METHODS

- **Design:** Two-phase prospective study. Pilot phase at tertiary • neurosurgical unit. Multi-centre phase across UK and Ireland
- **Sample & Data Collection:** lacksquare
 - Patient demographics, tumour characteristics, operative details, inpatient and six-month outcomes.
 - POS, SF36, and GPE surveys at four time points: twice pre-op, 3 month post-op and 6 month post-op
- Analysis:
 - Descriptive: Patient/tumour characteristics, operative



details, inpatient complications, outcomes.

POS validation: 1) Reliability 2) Validity 3) •

Responsiveness

Comparative: QoL outcomes vs. surgical approach, •

repair methods, complications, resection extent,

endocrine outcomes.

