.Incidentalom

1. Secretie - cz, TSH/fT4, IGF1, PRL, GH/LH

2. deficite

3. Dimensiuni - rmn.

4. Compresie chiasma optica - rmn, CV.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | |  | NESECRETANT | | | | | |  |  | |  |
| Sub 5 mm |  | | 5-10 mm |  | >10mm | |  | | >10 mm | |  | |  |
|  |  | |  |  | Departe de chiasma optica | |  | | Langa chiasma | |  | |  |
| Nu mai necesita urmarire ulterioar |  | Monitorizez rmn la 6 si 24 luni | |  | Monitorizez rmn la 12 luni apoi la fiecare 2 ani  Monitorizez deficite hh anual | |  | Monitorizez rmn + CV+ hormonal la 6 luni apoi anual | | |  | Chirurgie  - microad evolutiv  - Macroad evolutiv  - macroad cu insufic hpf  - compresie chiasma  - noncomplianta pac  - doreste sarcina repede  - susp neo  - risc de apoplexie | |
|  |  | |  |  | |  |  | | |  |  | |  |

Pe serii de autopsii, pana la 40%, majoritatea microad. La rmn/ct 10-20%.